

Alaska Division of Corporations, Business and Professional Licensing
<https://us02web.zoom.us/join/9687145200?pwd=ZUJkdjRlYkVldzNlcUo0dDZkdzFScE9KLT09>
 Nov 17, 2022 9:00 AM - Nov 17, 2022 4:30 PM AKST

1. Agenda Item #1 - 9:00 a.m. Roll Call/Call to Order.....	3
2. Agenda Item #2 - 9:02 a.m. Review/Approve Agenda.....	6
3. Agenda Item #3 - 9:05 a.m. Ethics Disclosures.....	8
4. Agenda Item #4 - 9:06 a.m. Review/Approve Meeting Minutes.....	19
5. Agenda Item #5 - 9:30 a.m. Investigative Update	
A. Board Report.....	33
B. Imposition of Civil Fines.....	37
C. License Actions	
6. Agenda Item #6 - 10:00 a.m. PDMP Update	
7. Agenda Item #7 - 10:15 a.m. Public Comment #1	
8. Agenda Item #8 - 10:30 p.m. Board Business	
A. Application Review.....	43
B. Review Lost/Stolen Rx.....	356
C. Correspondence.....	367
D. Credentialing Agencies.....	374
E. NABP Supply Chain Inspection.....	378
F. Other	
9. Agenda Item #9 - 11:30 a.m. Lunch	
10. Agenda Item #10 - 1:15 p.m. Subcommittee Updates	
A. Controlled Substances Advisory Subcommittee (CSAC) - Ruffridge.....	379
B. Well-Being - Schaber.....	381
C. 42 CFR Part 2 - Schaber	
D. Regulations - Ruffridge	
E. Statutes - Schaber (see next agenda item)	
11. Agenda Item #11 - 1:00 p.m. Industry Update	
A. AKPhA.....	383
12. Agenda Item #12 - 1:30 p.m. Statutes	
A. Board statutes chart.....	386

B. AKPhA Proposed Legislation - CONFIDENTIAL.....	397
13. Agenda Item #13 – 3:30 p.m. Budget Report/Division Update.....	398
14. Agenda Item #14 - 4:15 p.m. Public Comment #2	
15. Agenda Item #15 - 4:30 p.m. Recess until Friday, November 18, 2022	
16. Resources.....	404

STATE OF ALASKA

**Department of Commerce, Community, and Economic Development
Professional Licensing**

ALASKA BOARD OF PHARMACY



November 17 - 18, 2022

Board Packet

Alaska Board of Pharmacy Roster

Board Member Name	Initial Appointment	Reappointed	Term End
Justin Ruffridge, PharmD	03/01/2020	03/01/2019	03/01/2024
Ashley Schaber, PharmD	07/01/2021		03/01/2024
James Henderson, RPh	03/01/2017	03/01/2017	03/01/2025
Leif Holm, PharmD	03/01/2015		03/01/2023
Ramsey Bell, RPh	03/01/2022		03/01/2026
Vacant (Public Member)			
Vacant (Public Member)			

Name	Position	Subcommittee Membership
Justin Ruffridge	Chair	CSAC, Regulations, Compounding
Ashley Schaber	Vice Chair	Statutes, Well-Being, 42 CFR Part 2
James Henderson	Secretary	Regulations
Leif Holm		Compounding
Ramsey Bell		Statutes, Well-Being

State of Alaska

2023 HOLIDAY

CALENDAR

State Holidays

Date	Holiday
01/01/2023	New Year's Day (observed 01/02/2023)
01/16/2023	MLK Jr.'s Birthday
02/20/2023	Presidents' Day
03/27/2023	Seward's Day
05/29/2023	Memorial Day
07/04/2023	Independence Day
09/04/2023	Labor Day
10/18/2023	Alaska Day
11/11/2023	Veterans' Day (observed 11/10/2023)
11/23/2023	Thanksgiving Day
12/25/2023	Christmas Day

Please refer to appropriate collective bargaining unit agreement for more information regarding holidays.

 Holiday



JANUARY

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

FEBRUARY

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28				

MARCH

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

APRIL

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

MAY

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

JUNE

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

JULY

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

AUGUST

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

SEPTEMBER

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

OCTOBER

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

NOVEMBER

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

DECEMBER

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						



ALASKA BOARD OF PHARMACY MEETING

TENTATIVE AGENDA

NOVEMBER 17, 2022 – DAY 1

Dial: ID 269 330 2679

Passcode: 388658

Discussion of the following topics may require executive session. Only authorized members will be permitted to remain in the Zoom room during executive session.

Board Members:

Justin Ruffridge,
PharmD (Chair)

Ashley Schaber,
PharmD (Vice Chair)

James Henderson, *RPh*
(Secretary)

Leif Holm, *PharmD*

Ramsey Bell, *RPh*

Vacant, *Public*
Member

Vacant, *Public*
Member

Staff:

Laura Carrillo,
Executive
Administrator

Vacant,
Occupational
Licensing Examiner

Vacant,
Occupational
Licensing Examiner

Upcoming Meetings:

February 9 - 10, 2023

April 27 - 28, 2023

September 7 - 8, 2023

November 16 - 17,
2023

Meeting Details

Meeting Name: Board of Pharmacy Meeting - Day 1

Meeting Start Time: 9:00 AM AKDT

Meeting Start Date: 11/17/2022 (Thursday)

Meeting End Time: 4:30 PM AKDT

Meeting End Date: 11/17/2022 (Thursday)

Meeting Location: Zoom

Meeting Registration Link:

<https://us02web.zoom.us/join/zoom-join-link>

Agenda

- I. Agenda Item #1 – 9:00 a.m. Roll Call/Call to Order (Chair Ruffridge)
- II. Agenda Item #2 – 9:02 a.m. Review/Approve Agenda (Chair Ruffridge)
- III. Agenda Item #3 – 9:05 a.m. Ethics Disclosures (Chair Ruffridge)
- IV. Agenda Item #4 – 9:06 a.m. Review/Approve Meeting Minutes (Chair Ruffridge)
 - a. September 22 - 23, 2022 draft
 - b. October 21, 2022 draft
- V. Agenda Item #5 – 9:30 a.m. Investigative Update

Board Members:

Justin Ruffridge,
PharmD (Chair)

Ashley Schaber,
PharmD (Vice Chair)

James Henderson, *RPh*
(Secretary)

Leif Holm, PharmD

Ramsey Bell, *RPh*

Vacant, *Public*
Member

Vacant, *Public*
Member

Staff:

Laura Carrillo,
Executive
Administrator

Vacant,
Occupational
Licensing Examiner

Vacant,
Occupational
Licensing Examiner

Upcoming Meetings:

February 9 - 10, 2023

April 27 - 28, 2023

September 7 – 8, 2023

November 16 – 17,
2023

- VI. Agenda Item #6 – 10:00 a.m. PDMP Update
- VII. Agenda Item #7 – 10:15 a.m. Public Comment #1
- VIII. Agenda Item #8 – 10:30 a.m. Board Business
 - a. Application Review
 - b. Review Lost/Stolen Rx
 - c. Correspondence
 - d. Credentialing agencies
 - e. NABP Supply Chain Inspection
 - f. Other
- IX. Agenda Item #9 – 11:30 a.m. Lunch
- X. Agenda Item #10 – 12:30 p.m. Subcommittee Updates
 - a. Controlled Substances Advisory Subcommittee (Justin Ruffridge)
 - b. Pharmacy Well-being (Ashley Schaber)
 - c. 42 CFR Part 2 (Ashley Schaber)
 - d. Regulations (Justin Ruffridge)
 - e. Statute Subcommittee (Ashley Schaber)
- XI. Agenda Item #11 – 1:00 p.m. Industry Update
 - a. AKPhA
 - b. Other
- XII. Agenda Item #12 – 1:30 p.m. Statutes
- XIII. Agenda Item #13 – 3:30 p.m. Budget Report/Division Update (Melissa Dumas/Sara Chambers)
- XIV. Agenda Item #14 – 4:15 p.m. Public comment #2
- XV. Agenda Item #15 – 4:30 p.m. Recess until Friday, November 18, 2022

Links

Board of Pharmacy Homepage: pharmacy.alaska.gov

Prescription Drug Monitoring Program State page: pdmp.alaska.gov

CONFIDENTIAL

ETHICS SUPERVISOR DETERMINATION FORM

(Board or Commission Member)

Board or Commission: _____

Member Disclosing Potential Ethics Violation: _____

I have determined that the situation described on the attached ethics disclosure form

☐ does or would violate AS 39.52.110 - .190. Identify applicable statute below.

☐ does not or would not violate AS 39.52.110 - .190.

Signature of Designated Ethics Supervisor (Chair)

Printed Name of Designated Ethics Supervisor

Date: _____

COMMENTS (Please attach a separate sheet for additional space):

Note: Disclosure Form must be attached. Under AS 39.52.220, if the chair or a majority of the board or commission, not including the disclosing member, determines that a violation of AS 39.52.110-39.52.190 will exist if the member participates, the member shall refrain from voting, deliberating, or participating in the matter. A member will not be liable under the Ethics Act for action in accordance with such a determination so long as the member has fully disclosed all facts reasonably necessary to the determination and the attorney general has not advised the member, chair, or board or commission that the action is a violation. Forward disclosures with determinations to the State Ethics Attorney as part of your quarterly report. Quarterly reports are submitted to Litigation Assistant, Opinions, Appeals & Ethics, Department of Law, 1031 W. 4th Avenue, Suite 200, Anchorage, AK 99501.

Revised 2012

WHO IS MY DESIGNATED ETHICS SUPERVISOR?

Every state public officer, employee or board or commission member, has a designated ethics supervisor.

Executive Agencies

The ethics supervisor for each agency is the Commissioner or a senior manager to whom the Commissioner has delegated the function. The current ethics supervisor for each agency is listed below. The ethics supervisor for a Commissioner is Shawn Henderson, Director of Administrative Services in the Office of Governor, by delegation from the Governor.

Boards and Commissions

The Chair of each board and commission serves as the ethics supervisor for the other members and any executive director. The ethics supervisor for the Chair is Shawn Henderson, Director of Administrative Services in the Office of Governor, by delegation from the Governor. If a board or commission employs staff, the executive director serves as the ethics supervisor for these employees.

Public Corporations

The Chair of the board serves as the ethics supervisor for the other members of the board and any executive director. The executive director is the ethics supervisor for employees of the corporation.

Office of the Governor

The ethics supervisor for the Governor and Lieutenant Governor is the Attorney General. By delegation from the Governor, the ethics supervisor for the staff of the offices of the Governor and Lieutenant Governor is Shawn Henderson, Director of Administrative Services.

University of Alaska

By delegation of the University President, the ethics supervisor for university employees is Associate General Counsel Andy Harrington.

EXECUTIVE BRANCH AGENCIES

Administration: Dave Donley, Deputy Commissioner

Commerce, Community & Economic Development: Amy Demboski, Assistant Commissioner

Corrections: April Wilkerson, Administrative Services Director

Education & Early Development: Bobi Jo Grimes, HR Consultant III

Environmental Conservation: Theresa Zimmerman, Human Resources Manager

Fish & Game: Samantha Gatton, Acting Admin Services Director

Health & Social Services: Kimberley King, Human Resource Manager

Labor & Workforce Development: Cathy Muñoz, Deputy Commissioner

Law: Maria Bahr, Assistant Attorney General

Military & Veterans Affairs: Stanley A. Wright, Special Assistant to the Commissioner

Natural Resources: Peter Caltagirone, Special Assistant

Public Safety: Kelly Howell, Special Assistant to the Commissioner

Revenue: Brad Ewing, Administrative Services Director

Transportation & Public Facilities:

- Facility Services: John Binder, Deputy Commissioner
- Aviation: John Binder, Deputy Commissioner
- Central Region: Wolfgang Junge, Regional Director
- Northern Region: Rob Carpenter, Regional Director
- Southcoast Region: Lance Mearig, Regional Director
- Alaska Marine Highway System: Rob Carpenter, Deputy Commissioner
- Headquarters: Rob Carpenter, Deputy Commissioner
 - Administrative Services Division
 - Division of Program Development
 - Information Systems and Services Division
 - Statewide Design and Engineering Services Division

Updated June 2020

ETHICS INFORMATION FOR MEMBERS OF BOARDS & COMMISSIONS (AS 39.52)

Introduction

This is an introduction to AS 39.52, the *Alaska Executive Branch Ethics Act*. This guide is not a substitute for reading the law and its regulations. State board and commission members who have further questions should contact their board chair or staff.

The Ethics Act applies to all current and former executive branch public employees and *members of statutorily created boards and commissions*.

Scope of Ethics Act (AS 39.52.110)

Service on a state board or commission is a public trust. The Ethics Act prohibits substantial and material conflicts of interest. Further, board or commission members, and their immediate family, may not improperly benefit, financially or personally, from their actions as board or commission members. The Act does not, however, discourage independent pursuits, and it recognizes that minor and inconsequential conflicts of interest are unavoidable.

Misuse of Official Position (AS 39.52.120)

Members of boards or commissions may not use their positions for personal gain or to give an unwarranted benefit or treatment to any person. For example, board members may not:

- use their official positions to secure employment or contracts;
- accept compensation from anyone other than the State for performing official duties;
- use State time, equipment, property or facilities for their own personal or financial benefit or for partisan political purposes;
- take or withhold official action on a matter in which they have a personal or financial interest; or
- coerce subordinates for their personal or financial benefit.
- attempt to influence outcome of an administrative hearing by privately contacting the hearing officer.



Terry knew that a proposal that was before the board would harm Terry's business competitor. Instead of publicly disclosing the matter and requesting recusal, Terry voted on the proposal.



Board member Mick has board staff employee Bob type an article for him that Mick hopes to sell to an Alaskan magazine. Bob types the article on State time.

Improper Gifts (AS 39.52.130)

A board member may not solicit or accept gifts if a person could reasonably infer from the circumstances that the gift is intended to influence the board member's action or judgment. "Gifts" include money, items of value, services, loans, travel, entertainment, hospitality, and employment. All gifts from registered lobbyists are presumed to be improper, unless the giver is immediate family of the person receiving the gift.

A gift worth more than \$150 to a board member or the board member's immediate family must be reported within 30 days if:

- the board member can take official action that can affect the giver, or
- the gift is given to the board member because he or she is on a state board.

The receipt of a gift worth less than \$150 may be prohibited if a person could reasonably infer from the circumstances that the gift is intended to influence the board member's action or judgment. Receipt of such a gift should be disclosed.

Any gift received from another government, regardless of value, must be reported; the board member will be advised as to the disposition of this gift.

A form for reporting gifts is available at www.law.alaska.gov/doclibrary/ethics or from the board or commission staff.

This restriction on gifts does not apply to lawful campaign contributions.



The commission is reviewing Roy's proposal for an expansion of his business. Roy invites all the board members out to dinner at an expensive restaurant. He says it will be okay, since he isn't excluding any of the members.



Jody receives a holiday gift every year from Sam. Jody was recently appointed to a state board, but Sam has no business that is before the board. Jody may accept the gift.

Improper Use or Disclosure of Information (AS 39.52.140)

No former or current member of a board may use or disclose any information acquired from participation on the board if that use or disclosure could result in a financial or personal benefit to the board member (or immediate family), unless that information has already been disseminated to the public. Board members are also prohibited from disclosing confidential information, unless authorized to do so.



Sheila has been on the board for several years. She feels she has learned a great deal of general information about how to have a successful business venture. So she sets up her own business and does well.



Delores has always advised and assisted the other doctors in her clinic on their continuing education requirements. After Delores is appointed to the medical board, she discloses this role to the board and continues to advise the doctors in her clinic.



Jim reviews a confidential investigation report in a licensing matter. He discusses the practitioner's violation with a colleague who is not a board member.

Improper Influence in State Grants, Contracts, Leases or Loans (AS 39.52.150)

A board member, or immediate family, may not apply for, or have an interest in a State grant, contract, lease, or loan, if the board awards or takes action to administer the State grant, contract, lease, or loan.

A board member (or immediate family) may apply for or be a party to a *competitively solicited* State grant, contract or lease, if the board as a body does not award or administer the grant, contract, or lease and so long as the board member does not take official action regarding the grant, contract, or lease.

A board member (or immediate family) may apply for and receive a State loan that is generally available to the public and has fixed eligibility standards, so long as the board member does not take (or withhold) official action affecting the loan's award or administration.

Board members must report to the board chair any personal or financial interest (or that of immediate family) in a State grant, contract, lease or loan that is awarded or administered by the agency the board member serves. *A form for this purpose is available at www.law.alaska.gov/doclibrary/ethics or from the board or commission staff.*



John sits on a board that awards state grants. John hasn't seen his daughter for nearly ten years so he figures that it doesn't matter when her grant application comes up before the board.



The board wants to contract out for an analysis of the board's decisions over the last ten years. Board member Kim would like the contract since she has been on the board for ten years and feels she could do a good job.

Improper Representation (AS 39.52.160)

A board or commission member may not represent, advise, or assist a person in matters pending before the board or commission for compensation. A nonsalaried board or commission member may represent, advise, or assist in matters in which the member has an interest that is regulated by the member's own board or commission, if the member acts in accordance with AS 39.52.220 by disclosing the involvement in writing and on the public record, and refraining from all participation and voting on the matter. This section does not allow a board member to engage in any conduct that would violate a different section of the Ethics Act.



Susan sits on the licensing board for her own profession. She will represent herself and her business partner in a licensing matter. She discloses this situation to the board and refrains from participation in the board's discussions and determinations regarding the matter.

Restriction on Employment After Leaving State Service (AS 39.52.180)

For two years after leaving a board, a former board member may not provide advice or work for compensation on any matter in which the former member personally and substantially participated while serving on the board. This prohibition applies to cases, proceedings, applications, contracts, legislative bills, regulations, and similar matters. This section does not prohibit a State agency from contracting directly with a former board member.

With the approval of the Attorney General, the board chair may waive the above prohibition if a determination is made that the public interest is not jeopardized.

Former members of the governing boards of public corporations and former members of boards and commissions that have regulation-adoption authority, except those covered by the centralized licensing provisions of AS 08.01, may not lobby for pay for one year.



The board has arranged for an extensive study of the effects of the Department's programs. Andy, a board member, did most of the liaison work with the contractor selected by the board, including some negotiations about the scope of the study. Andy quits the board and goes to work for the contractor, working on the study of the effects of the Department's programs.



Andy takes the job, but specifies that he will have to work on another project.

Aiding a Violation Prohibited (AS 39.52.190)

Aiding another public officer to violate the Ethics Act is prohibited.

Agency Policies (AS 39.52.920)

Subject to the Attorney General's review, a board may adopt additional written policies further limiting personal or financial interests of board members.

Disclosure Procedures

DECLARATION OF POTENTIAL VIOLATIONS BY MEMBERS OF BOARDS OR COMMISSIONS (AS 39.52.220)

A board member whose interests or activities could result in a violation of the Ethics Act if the member participates in board action must disclose the matter on the public record and in writing to the board chair who determines whether a violation exists. *A form for this purpose is available at www.law.alaska.gov/doclibrary/ethics or from the board or commission staff.* If another board member objects to the chair's ruling or if the chair discloses a potential conflict, the board members at the meeting (excluding the involved member) vote on the matter. If the chair or the board determines a violation will occur, the member must refrain from deliberating, voting, or participating in the matter. For more information, see *Ethics Act Procedures for Boards and Commissions* available at the above noted web site.

When determining whether a board member's involvement in a matter may violate the Ethics Act, either the chair or the board or commission itself may request guidance from the Attorney General.

ATTORNEY GENERAL'S ADVICE (AS 39.52.240-250)

A board chair or a board itself may request a written advisory opinion from the Attorney General interpreting the Ethics Act. A former board member may also request a written advice from the Attorney General. These opinions are confidential. Versions of opinions without identifying information may be made available to the public.

REPORTS BY THIRD PARTIES (AS 39.52.230)

A third party may report a suspected violation of the Ethics Act by a board member in writing and under oath to the chair of a board or commission. The chair will give a copy to the board member and to the Attorney General and review the report to determine whether a violation may or does exist. If the chair determines a violation exists, the board member will be asked to refrain from deliberating, voting, or participating in the matter.

Complaints, Hearings, and Enforcement

COMPLAINTS (AS 39.52.310-330)

Any person may file a complaint with the Attorney General about the conduct of a current or former board member. Complaints must be written and signed under oath. The Attorney General may also initiate complaints based on information provided by a board. A copy of the complaint will be sent to the board member who is the subject of the complaint and to the Personnel Board.

All complaints are reviewed by the Attorney General. If the Attorney General determines that the complaint does not warrant investigation, the complainant and the board member will be notified of

the dismissal. The Attorney General may refer a complaint to the board member's chair for resolution.

After investigation, the Attorney General may dismiss a complaint for lack of probable cause to believe a violation occurred or recommend corrective action. The complainant and board member will be promptly notified of this decision.

Alternatively, if probable cause exists, the Attorney General may initiate a formal proceeding by serving the board or commission member with an accusation alleging a violation of the Ethics Act. Complaints or accusations may also be resolved by settlement with the subject.

CONFIDENTIALITY (AS 39.52.340)

Complaints and investigations prior to formal proceedings are confidential. If the Attorney General finds evidence of probable criminal activity, the appropriate law enforcement agency shall be notified.

HEARINGS (AS 39.52.350-360)

An accusation by the Attorney General of an alleged violation may result in a hearing. An administrative law judge from the state's Office of Administrative Hearings serves as hearing officer and determines the time, place and other matters. The parties to the proceeding are the Attorney General, acting as prosecutor, and the accused public officer, who may be represented by an attorney. Within 30 days after the hearing, the hearing officer files a report with the Personnel Board and provides a copy to the parties.

PERSONNEL BOARD ACTION (AS 39.52.370)

The Personnel Board reviews the hearing officer's report and is responsible for determining whether a violation occurred and for imposing penalties. An appeal may be filed by the board member in the Superior Court.

PENALTIES (AS 39.52.410-460)

When the Personnel Board determines a board member has violated the Ethics Act, it will order the member to refrain from voting, deliberating, or participating in the matter. The Personnel Board may also order restitution and may recommend that the board member be removed from the board or commission. If a recommendation of removal is made, the appointing authority will immediately remove the member.

If the Personnel Board finds that a former board member violated the Ethics Act, it will issue a public statement about the case and will ask the Attorney General to pursue appropriate additional legal remedies.

State grants, contracts, and leases awarded in violation of the Ethics Act are voidable. Loans given in violation of the Ethics Act may be made immediately payable.

Fees, gifts, or compensation received in violation of the Ethics Act may be recovered by the Attorney General.

The Personnel Board may impose a fine of up to \$5,000 for each violation of the Ethics Act. In addition, a board member may be required to pay up to twice the financial benefit received in violation of the Ethics Act.

Criminal penalties are in addition to the civil penalties listed above.

DEFINITIONS (AS 39.52.960)

Please keep the following definitions in mind:

Benefit - anything that is to a person's advantage regardless financial interest or from which a person hopes to gain in any way.

Board or Commission - a board, commission, authority, or board of directors of a public or quasi-public corporation, established by statute in the executive branch, including the Alaska Railroad Corporation.

Designated Ethics Supervisor - the chair or acting chair of the board or commission for all board or commission members and for executive directors; for staff members, the executive director is the designated ethics supervisor.

Financial Interest - any property, ownership, management, professional, or private interest from which a board or commission member or the board or commission member's immediate family receives or expects to receive a financial benefit. Holding a position in a business, such as officer, director, partner, or employee, also creates a financial interest in a business.

Immediate Family - spouse; another person cohabiting with the person in a conjugal relationship that is not a legal marriage; a child, including a stepchild and an adoptive child; a parent, sibling, grandparent, aunt, or uncle of the person; and a parent or sibling of the person's spouse.

Official Action - advice, participation, or assistance, including, for example, a recommendation, decision, approval, disapproval, vote, or other similar action, including inaction, by a public officer.

Personal Interest - the interest or involvement of a board or commission member (or immediate family) in any organization or political party from which a person or organization receives a benefit.

For further information and disclosure forms, visit our [Executive Branch Ethics web site](#) or please contact:

State Ethics Attorney
Alaska Department of Law
1031 West 4th Avenue, Suite 200
Anchorage, Alaska 99501-5903
(907) 269-5100
attorney.general@alaska.gov

Revised 9/2013

EXECUTIVE BRANCH ETHICS ACT

Responsibilities of Designated Ethics Supervisors for Boards and Commissions

Boards and commissions subject to the Ethics Act have designated ethics supervisors. The chair serves as the designated ethics supervisor for board or commission members and the executive director. The executive director is the designated ethics supervisor for staff. The designated ethics supervisor for a chair is the governor, who has delegated this responsibility to Guy Bell, Administrative Director of the Office of the Governor.

Designated ethics supervisors should refer to the **2019 Designated Ethics Supervisors Handbook** (503KB PDF), available from the state ethics attorney, regarding their responsibilities under the Ethics Act. Briefly, as designated ethics supervisor, you must --

1. Ensure that members and employees are provided copies of the guides, Ethics Information for Members of Boards and Commissions and Ethics Act Procedures for Boards and Commissions -- and keep a supply of disclosure forms.
 1. These guides, other educational materials, disclosure forms, statutes and regulations are available for review and copying on the [Department of Law ethics web site](#). If access to this page is not available, please contact the Attorney General's office at 269-5275.
2. Review all disclosures, investigate potential ethics violations, make determinations regarding conduct, and take action.
3. Keep member or employee disclosure statements (of potential violations, receipt of gifts, and interests in grants/contracts/leases/loans) on file in your office. Disclosure of a gift received from another government must be forwarded to the Office of the Governor.
4. Submit an ethics report to the Department of Law in April, July, October and January for the preceding quarter. You will receive a reminder. There is a sample report on the ethics web page.
 1. Mail, email or fax to Jennifer L. Williams, Paralegal, Department of Law, Opinions, Appeals & Ethics Section, 1031 W. 4th Avenue, Suite 200, Anchorage, AK, 99501, ethicsreporting@alaska.gov, fax no. 907-258-4978.

You may request ethics advice from your agency's Assistant Attorney General or from the State Ethics Attorney, Maria Bahr, at 269-5285 or maria.bahr@alaska.gov. Please direct questions about reporting procedures to Jennifer L. Williams at 269-5275 or jennifer.williams1@alaska.gov.

DEPARTMENT OF COMMERCE, COMMUNITY, AND ECONOMIC DEVELOPMENT
DIVISION OF CORPORATIONS, BUSINESS AND PROFESSIONAL LICENSING

BOARD OF PHARMACY

DRAFT CONDENSED MINUTES OF THE MEETING HELD (SEPTEMBER 22 - 23, 2022)

Date:	September 22 – 23, 2022
Time:	Scheduled 9:00 a.m.
Location:	Zoom & Anchorage – Robert Atwood Building, Suite 1550, 500 W. 7 th Ave, Anchorage, AK 99501
Attending:	Board Members: Justin Ruffridge, Ashley Schaber, Ramsey Bell, Leif Holm, James Henderson. Staff: Laura Carrillo, Bradley Johnson, Lisa Sherrell, Michael Bowles, Sara Chambers, Glenn Hoskinson
Absent:	

Topic: Roll Call Day 1		
Brief Discussion:	N/A	
Motion:	N/A	
Recorded as Present:	Justin Ruffridge	James Henderson
	Ashley Schaber	
	Ramsey Bell	
	Leif Holm	
Action Items:	N/A	
Topic: Approve Agenda		
Brief Discussion:	The board reviews the agenda for September 22 – day 1.	
Motion:	<ul style="list-style-type: none">Ashley Schaber motions to approve the agenda as written, seconded by Ramsey Bell, and approved unanimously. It is: <p>RESOLVED to approve September 22, 2022 agenda as written.</p>	
Recorded Votes:	Justin Ruffridge	James Henderson
	Ashley Schaber	
	Ramsey Bell	
	Leif Holm	
Action Items:	N/A	
Topic: Ethics disclosures		

Brief Discussion:	Ashley Schaber: member of the AKPhA and legislative committee. Justin Ruffridge: candidate for district 7 state house	
Motion:	N/A	
Recorded Votes:	N/A	
Action Items:	N/A	
Topic: Draft minutes		
Brief Discussion:	The board reviews the draft minutes from June 16, 2022.	
Motion:	<ul style="list-style-type: none">Ashley Schaber motions to approve the minutes as written, seconded by Ramsey Bell, and approved unanimously. It is: RESOLVED to approve the June 16, 2022 minutes as final.	
Recorded Votes:	Justin Ruffridge	James Henderson
	Ashley Schaber	
	Ramsey Bell	
	Leif Holm	
Action Items:	<ul style="list-style-type: none">Ms. Carrillo will request the final June 16, 2022 minutes be posted on the board's website.	
Topic: INV Update		
Brief Discussion:	Investigator Bowles provides a brief presentation for the public on the investigative process then proceeds with a presentation for reviewing board members. Mr. Bowles then provides the board's investigative report, which included matters from June 3, 2022 through September 8, 2022. In this timeframe, 30 matters remained open and 47 matters were closed. The board reviews cases related to imposition of civil fines and suspension.	
Motion:	On a motion duly made by Ashley Schaber in accordance with AS 44.62.310(c)(2) and seconded by James Henderson, the board unanimously moves to enter executive session for the purpose of discussing subjects that tend to prejudice the reputation and character of any person, provided the person may request a public discussion. No request was made for public discussion. It is: RESOLVED to enter into executive session in accordance with AS 44.62.310(c)(2). Staff, Michael Bowles, Laura Carrillo, and Bradley Johnson are authorized to remain in the room. Off record for executive session at 10:14 a.m. On record from executive session at 10:44 a.m. No motions were made in executive session. <ul style="list-style-type: none">Ashley Schaber motions to accept the imposition of civil fine for 2022-000215 in the amount of \$200, seconded by James Henderson, and approved unanimously, it is: RESOLVED to accept the imposition of civil fine for 2022-000215.	

	<ul style="list-style-type: none">Ashley Schaber motions to accept the imposition of civil fine for 2022-000216 in the amount of \$200, seconded by Ramsey Bell, and approved by the majority with James Henderson absent during voting, it is: RESOLVED to accept the imposition of civil fine for 2022-000216.Ashley Schaber motions to accept the imposition of civil fine for 2022-000294 in the amount of \$300, seconded by Ramsey Bell, and approved by the majority with James Henderson absent during voting, it is: RESOLVED to accept the imposition of civil fine for 2022-000294.Ashley Schaber motions to accept the imposition of civil fine for 2022-000354 in the amount of \$500, seconded by Ramsey Bell, and approved by the majority with James Henderson absent during voting, it is: RESOLVED to accept the imposition of civil fine for 2022-000354.Ashley Schaber motions to accept the imposition of civil fine for 2022-000446 in the amount of \$1,000, seconded by Ramsey Bell, and approved by the majority with James Henderson absent during voting, it is: RESOLVED to accept the imposition of civil fine for 2022-000446.Ashley Schaber motions to accept the revocation of pharmacy technician license #138777, case #2019-000721, per the authority of AS 08.80.030(8), Powers and Duties of the Board, and the finding that the licensee is in violation of AS 08.80.261(a)(1), seconded by Ramsey Bell, and approved by the majority with James Henderson absent during voting, it is: RESOLVED to accept the revocation of pharmacy technician license #138777, case #2019-000721.Ashley Schaber motions to accept the revocation of pharmacy technician license #PHAC1173, case #2019-000936, per the authority of AS 08.01.075, Disciplinary Powers of Boards, and the finding that the licensee is in violation of AS 08.80.261(a)(6)(14), and 12 AAC 52.920(a)(12)(13), seconded by Ramsey Bell, and approved by the majority with one abstention from Justin Ruffridge, it is: RESOLVED to accept the revocation of pharmacy technician license #PHAC1173, case #2019-000936.	
Recorded Votes:	Justin Ruffridge (abstain in case # 2019-000936)	James Henderson (absent for case #s 2022-000216, 2022-000294, 2022-000354, 2022-000446, and 2019-000721)
	Ashley Schaber	
	Ramsey Bell	
	Leif Holm	

Action Items:	<ul style="list-style-type: none">Justin Ruffridge will submit the signed imposition of civil fines and revocations to Investigator Bowles.	
Topic: Board Business		
Brief Discussion:	<p>The board reviews reports of lost or stolen prescriptions, an application for licensure, and previously tabled applications for shared pharmacy services. The board also reviews correspondence from the NABP, FDA regarding paxlovid, from a pharmacy regarding MAT in rural areas, and from a private person regarding IV nutrition. The board also reviews correspondence regarding wholesale drug distribution without a license in another jurisdiction. Ms. Carrillo recommends the board discuss this during their regulations discussion as it is not clear whether applicants qualify for licensure in Alaska if their home jurisdiction does not require a wholesale drug distribution.</p> <p>The board expresses interest in sending out guidance to licensees via the ListServ regarding paxlovid and fraud alerts by the Healthcare Distribution Alliance (HDA).</p>	
Motion:	<ul style="list-style-type: none">On a motion duly made by Ashley Schaber in accordance with AS 44.62.310(c)(2) and seconded by James Henderson, the board unanimously moves to enter executive session for the purpose of discussing subjects that tend to prejudice the reputation and character of any person, provided the person may request a public discussion. No request was made for public discussion. It is: RESOLVED to enter into executive session in accordance with AS 44.62.310(c)(2). Staff, Michael Bowles, Laura Carrillo, and Bradley Johnson, and AAG Harriet Dinegar-Milks are authorized to remain in the room. Off record for executive session at 10:54 a.m. On record from executive session at 11:42 a.m. No motions were made in executive session.James Henderson motions to approve the pharmacist license application for Tarick Mahmoud, in-process record #173961, seconded by Ramsey Bell, and approved unanimously, it is: RESOLVED to approve the pharmacist license application for Tarick Mahmoud.	
Recorded Votes:	Justin Ruffridge	James Henderson
	Ashley Schaber	
	Ramsey Bell	
	Leif Holm	
Action Items:	<ul style="list-style-type: none">Laura Carrillo will follow-up with PipelineRx on next step to complete their shared pharmacy services applications.Laura Carrillo will issue the pharmacist license for Tarick Mahmoud.Laura Carrillo will send a notice out through the listserv regarding prescribing Paxlovid with limitations and regarding the Healthcare Distribution Alliance (HDA) Pharmaceutical Cargo Security Coalition (PCSC) fraud alerts on diversion strategies.Laura Carrillo and James Henderson will work on a response regarding IV nutrition	

Topic: Subcommittee Updates		
Brief Discussion:	<p>Dr. Schaber chairs the meeting as Dr. Ruffridge is absent upon return from lunch.</p> <ul style="list-style-type: none">• <u>Controlled Substance Advisory Committee</u>: no updates• <u>Well-Being</u>: Dr. Schaber and Dr. Bell participate in this subcommittee along with Brandy Seignemartin from the AKPhA. Dr. Schaber requests the board to review the <i>Pharmacists Fundamental Rights and Responsibilities</i>. Dr. Schaber requests the board to review the document and officially sign on to support it as many state boards and colleges of pharmacies have. Dr. Holm expresses concern that the document may be used as leverage against employers and that discussions may become confrontational. Mr. Henderson’s impression is that it can be used to inform pharmacists on what their rights are and to be able to advocate for themselves on issues related to reasonable working hours and conditions. Dr. Bell’s concern is there isn’t mechanism for employers to be held accountable, e.g.: adequate staffing should be a right, especially for patient safety, but it is unclear how the guidance can translate to compelling pharmacies to adhere to this in practice. Dr. Schaber clarified it would serve as a show of support for improving well-being and wellness of pharmacists and help facilitate discussions between pharmacists and their employers.• <u>42 CFR Part II</u>: Lisa Sherrell and Dr. Schaber participate in this subcommittee. Ms. Sherrell states that providers are generally interested in knowing which patients are receiving treatment. In order to comply with 42 CFR Part II, the PDMP will need to incorporate an additional module in the system. Patients also have a right to decide whether they want their data to be disclosed. This is a continued collaborative effort with the vendor and DHSS.• <u>Compounding</u>: no updates	
Motion:	<ul style="list-style-type: none">• Leif Holm motions to table the compounding subcommittee until 2023, seconded by James Henderson, and approved unanimously, it is: RESOLVED to table the compounding subcommittee until 2023.	
Recorded Votes:	Justin Ruffridge	James Henderson
	Ashley Schaber	
	Ramsey Bell	
	Leif Holm	
Action Items:	<ul style="list-style-type: none">• Laura Carrillo will submit the board’s support of <i>Pharmacist’s Fundamental Responsibilities and Rights</i> on the APhA website.	
Topic: Industry Update		

Brief Discussion:	<u>AKPhA</u> Brandy Siegnemartin states she enjoyed serving on well-being subcommittee and provides the update that the AKPhA decided to sign on and support the document because it aligns with the values of the association. Other updates provided: Medicaid released proposed regulations; AKPhA worked on UAA/ISU doctor of pharmacy program; pursuing patient choice legislation/white bagging/brown bagging/PBM legislation; annual meeting will be February 17 – 19, 2023 in Anchorage	
Motion:	N/A	
Recorded Votes:	N/A	
Action Items:	N/A	
Topic: PDMP Update		
Brief Discussion:	Ms. Sherrell provides an update on the PDMP: division entered a contract with a consultant to do assessment and analysis of the PDMP, with the first draft of feedback expected in November; statewide integration has launched, which will allow single-sign on within the clinic HER and is a cost-savings to the state	
Motion:	N/A	
Recorded Votes:	N/A	
Action Items:	N/A	
Topic: Regulations #1		
Brief Discussion:	The board reviews the efficiency regulations related to pharmacies, pharmacists, pharmacist interns, student job shadowing, license renewal, remote pharmacies, wholesale drug distributors, outsourcing facilities, third-party logistics providers, drug rooms, and PDMP registration. Ms. Carrillo explains that the intent of these regulations is to reduce the administrative burden on staff as well as to reduce barriers to timely licensure. Dr. Ruffridge reads out loud the summary of what the proposed regulations aim to accomplish.	
Motion:	<ul style="list-style-type: none">Justin Ruffridge motions to approve the efficiency regulations presented at the September 22, 2022 day 1 meeting in response to Administrative Order 335 and Director Order 2022-1. With the motion being seconded by Ramsey Bell and approved unanimously, it was: <p style="text-align: center;">RESOLVED to approve the efficiency regulation amendments to: 12 AAC 52.020, .120,.220, .250, .300, .423, .610, .696, .697, .800, and .855.</p>	
Recorded Votes:	Justin Ruffridge	James Henderson
	Ashley Schaber	
	Ramsey Bell	
	Leif Holm	

Action Items:	<ul style="list-style-type: none">Laura Carrillo will forward the board’s approved efficiency regulations to the regulations specialist and department of law for cursory review and public comment.	
Topic: Roll Call Day 2		
Brief Discussion:	N/A	
Motion:	N/A	
Recorded Votes:	N/A	
Action Items:	N/A	
Topic: Review/Approve Agenda		
Brief Discussion:	The board reviews the agenda for September 23 – day 2.	
Motion:	<ul style="list-style-type: none">Ashley Schaber motions to amend the day 2 agenda by adding well-being to agenda item #5, regulations #2, seconded by Ramsey Bell, and approved unanimously, it is: <p>RESOLVED to approve the day 2 agenda as amended.</p>	
Recorded Votes:	Justin Ruffridge	James Henderson
	Ashley Schaber	
	Ramsey Bell	
	Leif Holm	
Action Items:	N /A	
Topic: Regulations #2 & #3		
Brief Discussion:	<p>The board reviews the draft FY23 regulations, including additional amendments to sections where efficiency regulations were identified and approved during day 1. The board also returns to discussion on Pharmacist’s Fundamental Responsibilities and Rights. Dr. Schaber states that if the board supports the document, it should be mentioned when notifying licensees that it is not enforceable or binding because it’s not a statute or regulation. Rather, it is to serve as a conversation starter to encourage licensees to come up with solutions with their employers.</p> <p>The board also reviews professional fitness questions and expresses a desire to ask about pending actions and felony convictions of all employees of a pharmacy or facility. AAG Harriet Dinegar-Milks advises against asking about pending actions. AAG Dinegar-Milks refers to the legal memo dated May 10 2022, which recommends disclosures for the direct parent-level owner of the physical facility (the actual building) rather than grandparent level owners or owners who do not directly own the building. Dr. Bell states that in some cases, the owner doesn’t have keys to access the building, which conflicts with the memo. Ms. Carrillo states a definition for “owner” would be helpful, to which AAG</p>	

	<p><i>Dinegar-Milks agreed. Dr. Schaber states there is a federal requirement to ask about owners in 21 U.S.C. Part 205.</i></p> <p><i>The board reviews draft regulations related to reporting veterinary prescriptions to the PDMP. Ms. Carrillo and Ms. Sherrell states the intent is to provide clarification across pharmacies and veterinarians on how to report so there is consistency. Dr. Ruffridge and Dr. Bell express concern about the draft language, particularly reporting codes for humans versus animals. Dr. Ruffridge and Dr. Bell express opposition against reviewing prescription history of clients. Ms. Carrillo states this has been the guidance provided by the department of law. The board ultimately wishes to strike the draft language.</i></p>	
Motion:	<ul style="list-style-type: none"><i>Ashley Schaber motions to support Pharmacist’s Fundamental Responsibilities and Rights and develop messaging of the role of the document to licensees, seconded by James Henderson, and approved by the majority with one nay, it is:</i> <p style="text-align: center;"><i>RESOLVED to support Pharmacist’s Fundamental Responsibilities and Rights.</i></p> <ul style="list-style-type: none"><i>Ashley Schaber motions to approve the FY2023 regulations presented at the September 23, 2022 day 2 meeting. With the motion being seconded by James Henderson and approved unanimously, it was:</i> <p style="text-align: center;"><i>RESOLVED to approve the FY2023 regulation projects affecting sections: 12 AAC 52.855, .860, .423, .800, .420, .300, .995, .635, .610, .696, .697, .020, .250, .670, .220, .120, .530, and .200; and to approve the creation of new sections for: manufacturers, remodeling, and automated distribution kiosks.</i></p>	
Recorded Votes:	<i>Justin Ruffridge</i>	<i>James Henderson</i>
	<i>Ashley Schaber</i>	
	<i>Ramsey Bell</i>	
	<i>Leif Holm</i>	
Action Items:	<ul style="list-style-type: none"><i>Laura Carrillo will forward the board’s approved FY2023 regulations to the regulations specialist and department of law for cursory review and public comment.</i><i>Laura Carrillo will work with AAG Dinegar-Milks on a draft definition for “ownership” and on revised professional fitness questions for the board’s consideration.</i>	
Topic: Voluntary Surrender		
Brief Discussion:	<i>The board was notified of a matter requiring urgent attention and were asked to consider a voluntary surrender.</i>	
Motion:	<ul style="list-style-type: none"><i>On a motion duly made by Ashley Schaber in accordance with AS 44.62.310(c)(2), the board unanimously moves to enter executive session for the purpose of discussing subjects that tend to prejudice the reputation and character of any person, provided the person may request a public discussion. No request was made for public discussion. It is:</i> <p style="text-align: center;"><i>RESOLVED to enter into executive session in accordance with AS 44.62.310(c)(2). Staff, Laura Carrillo and Bradley Johnson are authorized to remain in the room.</i></p> <p><i>Off record for executive session at 2:36 p.m.</i></p>	

	<i>On record from executive session at 3:15 p.m.</i> <i>No motions were made in executive session.</i> <ul style="list-style-type: none"><i>Ashley Schaber motions to accept the voluntary surrender for Christine Pitser, pharmacist license #137515, seconded by Ramsey Bell, and approved unanimously, it is:</i> <i>RESOLVED to accept the voluntary surrender for Christine Pitser, pharmacist license #137515.</i>	
Recorded Votes:	<i>Justin Ruffridge</i>	<i>James Henderson</i>
	<i>Ashley Schaber</i>	
	<i>Ramsey Bell</i>	
	<i>Leif Holm</i>	
Action Items:	<ul style="list-style-type: none"><i>Justin Ruffridge will send the signed voluntary surrender to Investigator Bowles.</i>	
Topic: Statutes		
Brief Discussion:	<i>The board reviews potential statute changes as referenced in the recent annual report.</i>	
Motion:	<ul style="list-style-type: none"><i>Ashley Schaber motions to form a statute subcommittee, to review potential statute areas from the board's FY2022 annual report, and pursue changes to AS 08.80.270 to remove the executive administrator salary range from statute, seconded by Ramsey Bell, and approved by the majority, it is:</i> <i>RESOLVED to form a statute subcommittee.</i>	
Recorded Votes:	<i>Justin Ruffridge</i>	<i>James Henderson (absent during voting)</i>
	<i>Ashley Schaber</i>	
	<i>Ramsey Bell</i>	
	<i>Leif Holm</i>	
Action Items:	<ul style="list-style-type: none"><i>Ashley Schaber will participate in the statute subcommittee.</i><i>Laura Carrillo will add statute subcommittee to the November meeting agenda.</i>	
Topic: EA Recruitment		
Brief Discussion:	<i>Director Chambers and Deputy Director Saviers joins the board to provide an update on the executive administrator recruitment. Dr. Schaber expresses interest in increasing the salary range for the position, which is currently in statute. Director Chambers states that there was an error in the salary scale as posted in the recruitment, which has been corrected. The board expresses interest in participating on the interview panel.</i>	
Motion:	<i>N/A</i>	
Action Items:	<i>N/A</i>	

Topic: Administrative Update	
Brief Discussion:	<p><i>Ms. Carrillo reviews the task list, most of which are complete, pending, or awaiting status updates for the November meeting.</i></p> <p><i>The board sets the next meeting dates:</i></p> <ul style="list-style-type: none"> • <i>February 9 – 10, 2023 (Juneau)</i> • <i>April 27 – 28, 2023 (Anchorage)</i> • <i>September 7 – 8, 2023 (Anchorage)</i> • <i>November 16 – 17, 2023 (Anchorage)</i>
Motion:	N/A
Action Items:	<ul style="list-style-type: none"> • <i>Laura Carrillo will work on travel requests for the upcoming meetings.</i> • <i>Laura Carrillo and Justin Ruffridge will work on draft agendas for the upcoming meetings.</i>

Public Comments:	N/A
Next Meeting:	November 17-18, 2022
Adjournment:	4:30 p.m.

DEPARTMENT OF COMMERCE, COMMUNITY, AND ECONOMIC DEVELOPMENT
DIVISION OF CORPORATIONS, BUSINESS AND PROFESSIONAL LICENSING

BOARD OF PHARMACY

DRAFT CONDENSED MINUTES OF THE MEETING HELD (OCTOBER 21, 2022)

Date:	October 21, 2022
Time:	Scheduled 9:00 a.m.
Location:	Zoom
Attending:	Board Members: Justin Ruffridge, Ashley Schaber, Leif Holm, James Henderson. Staff: Laura Carrillo
Absent:	

Topic: Roll Call		
Brief Discussion:	N/A	
Motion:	N/A	
Recorded as Present:	Justin Ruffridge	James Henderson
	Ashley Schaber	Leif Holm
Action Items:	N/A	
Topic: Approve Agenda		
Brief Discussion:	The board reviews the agenda.	
Motion:	<ul style="list-style-type: none">Ashley Schaber motions to approve the agenda as written, seconded by James Henderson, and approved unanimously. It is: <p>RESOLVED to approve the October 21, 2022 agenda as written.</p>	
Recorded Votes:	Justin Ruffridge	James Henderson
	Ashley Schaber	Leif Holm
Action Items:	N/A	
Topic: Ethics disclosures		

Brief Discussion:	<i>Ashley Schaber: member of the AKPhA and legislative committee. Justin Ruffridge: candidate for district 7 state house</i>	
Motion:	<i>N/A</i>	
Recorded Votes:	<i>N/A</i>	
Action Items:	<i>N/A</i>	
Topic: Fees		
Brief Discussion:	<i>Ms. Carrillo discussed a proposed \$300 change fee for pharmacies and facilities experiencing a change in ownership, location, or name. Dr. Ruffridge noted the change fee should not be higher than the cost to become initially licensed, e.g.: the total fees for an initial drug room license is \$250. Ms. Carrillo suggested the change fee could potentially be 50% of the initial cost, but that it can't be too low as the board will be in deficit. Ms. Carrillo informed the board that the division's administrative officers could be made available to discuss the change fee at a subsequent meeting.</i>	
Motion:	<i>N/A</i>	
Recorded Votes:	<i>N/A</i>	
Action Items:	<ul style="list-style-type: none"><i>Ms. Carrillo will request that administrative officer, Melissa Dumas, be available to discuss the change fee at the board's November 17-18 meeting.</i>	
Topic: Regulations		
Brief Discussion:	<p><i>The board reviews draft regulations for pharmacy technicians to engage in the administration of vaccines and related emergency medications in 12 AAC 52.992 per the new authority given in HB 145. Dr. Ruffridge states regulations are required to implement the new law. The draft was prepared by Ms. Carrillo based on rules in Idaho, which allows only technicians with national certification to engage in this practice. Dr. Schaber expresses interest in delegating the approval of this practice by the technician's employer rather require a request to be submitted to the board for approval, to which Dr. Ruffridge agrees. Dr. Ruffridge suggests that although this deals with administration, the new language for technicians should fall under 12 AAC 52.235, which is the section specific to pharmacy technicians who hold a national certification. Mr. Henderson agrees. The board then discussed education and training requirements.</i></p> <p><i>Lauren Paul with CVS Health comments that if the board references technicians' requirement to comply with 12 AAC 52.992(a)(1) regarding training, it seems to imply that technicians have the ability to participate in areas other than the administration aspect. Lauren states that training provided by the APHA only focuses on administration. The board then works on language clarifying what education must be met for pharmacists, interns, and technicians administering vaccines and related emergency medications.</i></p>	
Motion:	<ul style="list-style-type: none"><i>Ashley Schaber motions to approve language amending 12 AAC 52.235, 12 AAC 52.325, and 12 AAC 52.992 to introduce language for the administration of vaccines and related emergency medications by pharmacy technicians with national certification, seconded by James Henderson, and approved unanimously, it is:</i>	

	<p><i>RESOLVED to amend 12 AAC 52.235, 12 AAC 52.325, and 12 AAC 52.992.</i></p> <p><i>RESOLVED to accept the imposition of civil fine for 2022-000294.</i></p> <p><i>Discussion: The board requests cursory review by the Department of Law and release of the proposed amendments for public comment. The board wishes to review the public comments before or no later than its February 2023 meeting, if possible.</i></p>	
Recorded Votes:	Justin Ruffridge	James Henderson
	Ashley Schaber	Leif Holm
Action Items:	<ul style="list-style-type: none">• Laura Carrillo will forward the board’s motion and draft language for 12 AAC 52.235, 12 AAC 52.325, and 12 AAC 52.992 to the regulations specialist with a request it be released for public comment after review by the Department of Law.	
Topic: Administrative Business		
Brief Discussion:	<p><i>The board reviews a draft listserv notice regarding HB 145. Dr. Schaber’s concern is around language relating to Medicaid and Medicare reimbursement and the board deliberated appropriate language for the notice.</i></p> <p><i>The board receives an update that it has been added to the APHA’s website as supporting Pharmacist’s Fundamental Responsibilities and Rights. Dr. Schaber drafted language for a listserv notice regarding this support.</i></p> <p><i>The board then reviews proposed changes to the internal renewal/approval process for professional fitness responses. Ms. Carrillo explains the updates are to give clarity as to what scenarios constitute the ability to renew a license/registration without further review by the investigative unit or the board. Dr. Schaber expresses interest in the definition of “DUI”, which includes controlled substances. Ms. Carrillo states that controlled substance violations will always be referred for further review.</i></p>	
Motion:	<ul style="list-style-type: none">• James Henderson motions to approve changes to the renewal/approval process for professional fitness responses document, seconded by Ashley Schaber and approved unanimously, it is: <p><i>RESOLVED to approve the renewal/approval process for professional fitness responses document.</i></p> <p><i>Discussion: Dr. Schaber clarifies that driving under the influence is related to alcohol.</i></p>	
Recorded Votes:	Justin Ruffridge	James Henderson
	Ashley Schaber	Leif Holm
Action Items:	<ul style="list-style-type: none">• Laura Carrillo will send a notice through the listserv regarding HB 145 and the Pharmacist’s Fundamental Responsibilities and Rights document	

Public Comments:	N/A
Next Meeting:	November 17-18, 2022
Adjournment:	11:15 a.m.

DRAFT



THE STATE
of **ALASKA**

Department of Commerce, Community,
and Economic Development

DIVISION OF CORPORATIONS, BUSINESS AND
PROFESSIONAL LICENSING

550 West Seventh Avenue, Suite 1500
Anchorage, AK 99501-3567
Main: 907.269.8160
Fax: 907.269.8156

MEMORANDUM

DATE: November 03, 2022
TO: Board of Pharmacy
THRU: Greg Francois, Chief Investigator ^{DS} *GF*
FROM: Michael Bowles, Investigator ^{DS} *MB*
RE: Investigative Report for the November 17, 2022 Meeting

The following information was compiled as an investigative report to the Board for the period of September 09, 2022 thru November 03, 2022; this report includes cases, complaints, and intake matters handled since the last report.

Matters opened by the Paralegals in Anchorage and Juneau, regarding continuing education audits and license action resulting from those matters are covered in this report.

OPEN - 36

<u>Case Number</u>	<u>Violation Type</u>	<u>Case Status</u>	<u>Status Date</u>
OUT OF STATE PHARMACY			
2022-001054	Violation of licensing regulation	Intake	10/27/2022
2022-000434	Violation of licensing regulation	Complaint	06/02/2022
2022-000745	Violation of licensing regulation	Complaint	09/28/2022
2022-000746	Violation of licensing regulation	Complaint	09/01/2022
2022-000826	Violation of licensing regulation	Complaint	09/20/2022
2022-000976	Violation of licensing regulation	Complaint	10/25/2022
2021-000111	Violation of licensing regulation	Monitor	09/20/2022
2022-000213	Falsified application	Investigation	08/15/2022
2022-000476	Violation of licensing regulation	Investigation	11/02/2022

PHARMACIST

2022-001030	Violating professional ethics	Complaint	10/17/2022
2022-000783	Unlicensed practice or activity	Investigation	10/17/2022

PHARMACY

2022-001055	Violation of licensing regulation	Intake	10/27/2022
2022-000782	Violation of licensing regulation	Complaint	09/14/2022
2022-000905	Violation of licensing regulation	Complaint	10/11/2022
2021-000037	PDMP Violation	Monitor	01/21/2021
2021-000775	Violation of licensing regulation	Investigation	08/27/2021
2021-000776	Violation of licensing regulation	Investigation	08/27/2021
2021-000784	Violation of licensing regulation	Investigation	08/27/2021
2022-000424	Violation of licensing regulation	Investigation	09/06/2022
2022-000634	Violation of licensing regulation	Investigation	10/20/2022

PHARMACY TECHNICIAN

2022-000828	Criminal action - conviction	Intake	08/31/2022
2019-000936	Falsified application	Investigation	02/11/2021

WHOLESALE DRUG DEALER

2022-001046	Action in another state	Intake	10/24/2022
2022-001058	Action in another state	Intake	11/01/2022
2022-001059	Action in another state	Intake	11/01/2022
2022-000827	Violation of licensing regulation	Complaint	09/20/2022
2022-000829	Violation of licensing regulation	Complaint	09/29/2022
2022-000934	Unlicensed practice or activity	Complaint	10/19/2022
2022-000936	Unlicensed practice or activity	Complaint	10/19/2022
2022-000937	Unlicensed practice or activity	Complaint	10/19/2022
2022-000978	Violation of licensing regulation	Complaint	10/26/2022
2022-001033	Violation of licensing regulation	Complaint	11/02/2022
2022-001034	Violation of licensing regulation	Complaint	11/02/2022
2022-001035	Violation of licensing regulation	Complaint	11/02/2022

2022-001036	Violation of licensing regulation	Complaint	11/02/2022
2022-000749	Violation of licensing regulation	Investigation	10/17/2022

Closed - 35

<u>Case #</u>	<u>Violation Type</u>	<u>Case Status</u>	<u>Closed</u>	<u>Closure</u>
OUT OF STATE PHARMACY				
2022-000977	Violation of licensing regulation	Closed-Intake	10/27/2022	Review Complete
2022-000215	Violation of licensing regulation	Closed-Investigation	10/07/2022	License Action
PHARMACIST				
2021-001312	Fraud or misrepresentation	Closed-Investigation	10/04/2022	Advisement Letter
2022-000485	Drug diversion	Closed-Investigation	10/12/2022	License Action
PHARMACIST INTERN				
2022-000435	Unlicensed practice or activity	Closed-Investigation	09/13/2022	Advisement Letter
PHARMACY				
2022-000926	Compliance Inspection	Closed-Intake	10/27/2022	Other (See Abstract)
2022-000216	Violation of licensing regulation	Closed-Investigation	10/07/2022	License Action
2022-000875	Compliance Inspection	Closed-Division Inspection	09/21/2022	Closed - Case Opened
2022-001001	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance
2022-001002	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance
2022-001003	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance
2022-001004	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance
2022-001005	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance
2022-001006	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance
2022-001007	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance
2022-001008	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance

2022-001009	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance
2022-001010	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance
2022-001011	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance
2022-001012	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance
2022-001013	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance
2022-001014	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance
2022-001015	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance
2022-001016	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance
2022-001018	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance
2022-001019	Compliance Inspection	Closed-Division Inspection	10/13/2022	Compliance

PHARMACY TECHNICIAN

2022-000815	Criminal action - conviction	Closed-Intake	09/19/2022	Review Complete
2019-000721	Falsified application	Closed-Investigation	10/10/2022	License Action

WHOLESALE DRUG DEALER

2022-000953	Falsified application	Closed-Intake	10/27/2022	Review Complete
2022-000992	License application problem	Closed-Intake	10/27/2022	Review Complete
2022-000995	Violation of licensing regulation	Closed-Intake	10/27/2022	Review Complete
2022-000996	Violation of licensing regulation	Closed-Intake	10/27/2022	Review Complete
2022-000294	Violation of licensing regulation	Closed-Investigation	10/07/2022	License Action
2022-000354	Violation of licensing regulation	Closed-Investigation	10/07/2022	License Action
2022-000446	Violation of licensing regulation	Closed-Investigation	10/07/2022	License Action

END OF REPORT



Type of Report: (check one box only)

☒ New Report☐ Amendment Key (prior report dated): 7REXRZ2H0UXQ

1. DEA Registration Number: BC8162618

Name of Business: SAFEWAY INC

Address: 1725 ABBOTT ROAD

City: ANCHORAGE

State: AK

ZIP Code: 99507

Point of Contact: EMILY GIFFORD

Email Address: S2628C01@SAFEWAY.COM

Phone No.: 9073392860

Date of the Theft or Loss (or first discovery of theft or loss): October 31, 2022

Number of Thefts and Losses in the past 24 months: 0

Principal Business of Registrant: CHAIN PHARMACY

2. Type of theft or loss: PACKAGING DISCREPANCY:

3. Loss in Transit. (*Fill out this section only if there was a loss in transit, or hijacking of transport vehicle.)

Name of Common Carrier:

Telephone Number of Common Carrier:

Package Tracking Number:

Have there been losses in transit from this same carrier in the past?

☐ No☐ Yes (If yes, how many, excluding this theft or loss?):

Was the package received and accepted by the consignee?

☐ No☐ Yes (If yes, the consignee is responsible for reporting the theft or loss.)

If the package was accepted by the consignee, did it appear to be tampered with?

☐ No☐ Yes

Name of Consignee / Supplier:

Enter the Name of Consignee (if reported by the supplier), or the Name of Supplier (if the package was accepted by the consignee).

If the consignee does not have a DEA Registration Number, e.g. if this was a shipment to a patient, or a nursing home emergency kit, enter "Patient" or "Nursing Home Kit."

DEA Registration Number of Consignee / Supplier:

Enter the DEA Registration Number of Consignee (if reported by the supplier), or DEA Registration Number of Supplier, (if the package was accepted by the consignee). If the controlled substances were shipped to a non-registrant, leave blank, unless a registered pharmacy shipped to an emergency kit held on site at a nursing home. In this case, the supplying pharmacy is required to report the theft or loss.

4. If this was a robbery, were any people injured? ☐ No ☐ Yes (If yes, how many?): Were any people killed? ☐ No ☐ Yes (If yes, how many?):

5. Purchase value to Registrant of controlled substances taken?: \$ 5

6. Were any pharmaceuticals or merchandise taken? ☒ No ☐ Yes (Est. Value):

7. Was theft reported to Police?

☒ No☐ Yes (If yes, fill out the following information):

Name of Police Department:

Police Report number:

Name of Responding Officer:

Phone No.:

8. Which corrective measure(s) have you taken to prevent a future theft or loss?

☐ Installed monitoring equipment (e.g. video camera).☐ Increased employee monitoring (e.g. random drug tests).☐ Installed metal bars or other security on doors or windows.☐ Secured Controlled Substances within safe.☒ Other (Please describe on last page).☐ Provided security training to staff.☐ Requested increased security patrols by Police.☐ Hired security guards for premises.☐ Terminated employee.

Report of Theft or Loss of Controlled Substances

OMB No. 1117-0001 (Exp. Date 7/31/2023)

U.S. Department of Justice
Drug Enforcement Administration
Diversion Control Division



LIST OF CONTROLLED SUBSTANCES LOST

[illegible]



9. What identifying marks, symbols, or price codes were on the labels of these containers that would assist in identifying the products?:

10. If Official Controlled Substance Order Forms (DEA-222) were stolen, give numbers:

Describe any other corrective measure(s) you have taken to prevent a future theft or loss:

THE PHARMACY STAFF WILL CONDUCT AN AUDIT OF HYDROCODONE POLISTIREX AND CHLORPHENIRAMINE 10-8/5ML EXTENDED-RELEASE SUSPENSION EVERY TWO WEEKS FOR THE NEXT 6 MONTHS OR UNTIL THE CAUSE OF LOSS IS IDENTIFIED.

Enter remarks, if required. Description of how theft or loss occurred. Attach a separate sheet, if necessary:

DUE TO THE VARIANCE DISCOVERED AND THE FREQUENCY OF DISPENSING OF THIS PRODUCT, WE HAVE NO EVIDENCE TO SUPPORT ANY OTHER EXPLANATION FOR THIS LOSS.

The foregoing information is correct to the best of my knowledge and belief: By signing my full name in the space below, I hereby certify that the foregoing information furnished on this DEA Form 106 is true and correct, and understand that this constitutes an electronic signature for purposes of this reporting requirement only.

Signature: EMILY GIFFORD

Title: PHARMACY MANAGER

Date Signed: November 08, 2022

NOTICE: In accordance with the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this collection of information is 1117-0001. Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Freedom of Information: Please prominently identify any confidential business information per 28 CFR 16.8(c) and Exemption 4 of the Freedom of Information Act (FOIA). In the event DEA receives a FOIA request to obtain such information, DEA will give written notice to the registrant to obtain such information. DEA will give written notice to the registrant to allow an opportunity to object prior to the release of information.

Privacy Act Information

AUTHORITY: Section 301 of the Controlled Substances Act of 1970 (PL 91-513).

PURPOSE: Reporting of unusual or excessive theft or loss of a Controlled Substance.

ROUTINE USES: The Controlled Substances Act authorizes the production of special reports required for statistical and analytical purposes. Disclosures of information from this system are made to the following categories of users for the purposes stated:

A. Other Federal law enforcement and regulatory agencies for law enforcement and regulatory purposes.

B. State and local law enforcement and regulatory agencies for law enforcement and regulatory purposes.

EFFECT: Failure to report theft or loss of Controlled Substances may result in penalties under Section 402 and 403 of the Controlled Substances Act.

Report of Theft or Loss of Controlled Substances

OMB No. 1117-0001 (Exp. Date 7/31/2023)

U.S. Department of Justice
Drug Enforcement Administration
Diversion Control Division

Type of Report: (check one box only)

☒ New Report☐ Amendment Key (prior report dated): _____1. DEA Registration Number: BC3035614Name of Business: COSTCO WHOLESALEAddress: 330 W DIMOND BLVDCity: ANCHORAGEState: AKZIP Code: 99515Point of Contact: NICHELL MOOREEmail Address: W010PHM@COSTCO.COMPhone No.: (907) 267-7116RECEIVED
Juneau
SEP 30 2022Division of Corporations, Business
and Professional LicensingDate of the Theft or Loss (or first discovery of theft or loss): 09/16/2022Number of Thefts and Losses in the past 24 months: 4Principal Business of Registrant: ☒ Pharmacy ☐ Practitioner ☐ Manufacturer ☐ Hospital/Clinic ☐ Distributor ☐ NTP ☐ Other (Specify) _____

2. Type of Theft or Loss: Employee Theft (or Suspected)



3. Loss in Transit. (*Fill out this section only if there was a loss in transit, or hijacking of transport vehicle.)

Name of Common Carrier: _____

Telephone Number of Common Carrier: _____

Package Tracking Number: _____

Have there been losses in transit from this same carrier in the past?

☐ No☐ Yes (If yes, how many, excluding this theft or loss?): _____

Was the package received and accepted by the consignee?

☐ No☐ Yes (If yes, the consignee is responsible for reporting the theft or loss.)

If the package was accepted by the consignee, did it appear to be tampered with?

☐ No☐ Yes

Name of Consignee / Supplier: _____

Enter the Name of Consignee (if reported by the supplier), or the Name of Supplier (if the package was accepted by the consignee).

If the consignee does not have a DEA Registration Number, e.g. if this was a shipment to a patient, or a nursing home emergency kit, enter "Patient" or "Nursing Home Kit."

DEA Registration Number of Consignee / Supplier: _____

Enter the DEA Registration Number of Consignee (if reported by the supplier), or DEA Registration Number of Supplier, (if the package was accepted by the consignee). If the controlled substances were shipped to a non-registrant, leave blank, unless a registered pharmacy shipped to an emergency kit held on site at a nursing home. In this case, the supplying pharmacy is required to report the theft or loss.

4. If this was a robbery, were any people injured? ☒ No ☐ Yes (If yes, how many?): _____ Were any people killed? ☐ No ☐ Yes (If yes, how many?): _____5. What is the total value of the controlled substances stolen or lost?: \$ _____
(This is the amount you paid for the controlled substances, not the retail value.)

6. Was theft reported to Police?

☒ No☐ Yes (If yes, fill out the following information):

Name of Police Department: _____

Police Report number: _____

Name of Responding Officer: _____

Phone No.: _____

7. Which corrective measure(s) have you taken to prevent a future theft or loss?

☐ Installed monitoring equipment (e.g. video camera).☐ Increased employee monitoring (e.g. random drug tests).☐ Installed metal bars or other security on doors or windows.☐ Secured Controlled Substances within safe.☒ Other (Please describe on last page).☐ Provided security training to staff.☐ Requested increased security patrols by Police.☐ Hired security guards for premises.☐ Terminated employee.

8. Were any pharmaceuticals or merchandise taken?

☐ No☐ Yes (Estimated Value): _____

Report of Theft or Loss of Controlled Substances

OMB No. 1117-0001 (Exp. Date 7/31/2023)

LIST OF CONTROLLED SUBSTANCES LOST OR STOLEN

Examples	Trade Name of Substance or Preparation	NDC Number	Name of Controlled Substance in Preparation	Dosage Strength	Dosage Form	Total Quantity Lost or Stolen
	Desoxyn	00074-3377-01	Methamphetamine Hydrochloride	5 mg	Tablets	300
	Demerol	00409-1181-30	Meperidine Hydrochloride	50 mg/ml	Vial	150 ml
	Robitussin A-C	00031-8674-25	Codeine Phosphate	2 mg/cc	Liquid	5676 ml
	1. PHENOBARBITAL	75826-0139-10	PHENOBARBITAL	32.4MG	TABLETS	100
	2.					
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						

Remarks: (Optional)

AN RX FOR PHENOBARBITAL WAS FILLED 8/19/22 FOR 2 DIFFERENT NDC'S TOTALING 360 TABLETS. WHEN I CONTACTED THE PATIENT'S OWNER, SHE HAD ALREADY MIXED THE 2 NDC'S IN THE SAME BOTTLE AND HAD NO IDEA HOW MANY SHE HAD LEFT. IN REVIEWING VIDEO FOOTAGE FOR THAT DAY AND TIME, IT IS INCONCLUSIVE SINCE THE DISPENSING PHARMACIST HAD HER BACK TO THE CAMERA IN 1 ANGLE AND IN THE OTHER ANGLE, IT WAS DIFFICULT TO ZOOM IN AND SEE THE SPECIFIC NDC OR PILLS THAT WERE GIVEN. I DO NOT SUSPECT EMPLOYEE THEFT.

Express Quantity
in Dosage Units,
or Milliliters for
Liquids

Report of Theft or Loss of Controlled Substances

OMB No. 1117-0001 (Exp. Date 7/31/2023)

U.S. Department of Justice
Drug Enforcement Administration
Diversion Control Division

Form DEA-106 (10/23/2020) Pg. 3

LIST OF MAIL-BACK PACKAGES OR INNER LINERS LOST OR STOLEN**Examples**

Mail-Back Package	Inner Liner	Unique Identification Number(s)	Size of Inner Liner	Total Quantity Lost or Stolen
X		MBP1106, MBP1108 – MBP1110, MBP1112	N/A	5
	X	CRL1007 – CRL1027	15 GALLON	21
	X	CRL1201	5 GALLON	1
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
Remarks: (Optional)				Express in Total Quantities

If you are an authorized Retail Pharmacy or Hospital/Clinic with an onsite Pharmacy and reporting a theft or loss at a Long-Term Care Facility (LTCF), provide name and address of LTCF.

Name of LTCF

Address, City, State, Zip Code

RECEIVED
JUNEAU
SEP 30 2022
Division of Corporations, Business
and Professional Licensing
361



Describe any other corrective measure(s) you have taken to prevent a future theft or loss:

A WEEKLY COUNT OF THE DRUG WILL BE CONDUCTED FOR THE NEXT 90 DAYS, IN ADDITION TO THE REVIEW OF ALL MANUAL CHANGES FOR ALL CONTROLLED SUBSTANCES. ALSO, RETRAINING STAFF ON THE PHARMACY SECURITY POLICIES AND PROCEDURES AS WELL AS THE DOUBLE COUNT POLICY.

Enter remarks, if required. Description of how theft or loss occurred.

AN RX FOR PHENOBARBITAL WAS FILLED 8/19/22 FOR 2 DIFFERENT NDC'S TOTALING 360 TABLETS. WHEN I CONTACTED THE PATIENT'S OWNER, SHE HAD ALREADY MIXED THE 2 NDC'S IN THE SAME BOTTLE AND HAD NO IDEA HOW MANY SHE HAD LEFT. IN REVIEWING VIDEO FOOTAGE FOR THAT DAY AND TIME, IT IS INCONCLUSIVE SINCE THE DISPENSING PHARMACIST HAD HER BACK TO THE CAMERA IN 1 ANGLE AND IN THE OTHER ANGLE, IT WAS DIFFICULT TO ZOOM IN AND SEE THE SPECIFIC NDC OR PILLS THAT WERE GIVEN. I DO NOT SUSPECT EMPLOYEE THEFT.

The foregoing information is correct to the best of my knowledge and belief: By signing my full name in the space below, I hereby certify that the foregoing information furnished on this DEA Form 106 is true and correct, and understand that this constitutes an electronic signature for purposes of this reporting requirement only.

Signature: 

Title: PHARMACY MANAGER

Date Signed: 09/27/2022

NOTICE: In accordance with the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this collection of information is 1117-0001. Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Freedom of Information: Please prominently identify any confidential business information per 28 CFR 16.8(c) and Exemption 4 of the Freedom of Information Act (FOIA). In the event DEA receives a FOIA request to obtain such information, DEA will give written notice to the registrant to obtain such information. DEA will give written notice to the registrant to allow an opportunity to object prior to the release of information.

Privacy Act Information

AUTHORITY: Section 301 of the Controlled Substances Act of 1970 (PL 91-513)

PURPOSE: Reporting of unusual or excessive theft or loss of a Listed Chemical

ROUTINE USES. The Controlled Substances Act authorizes the production of special reports required for statistical and analytical purposes. Disclosures of information from this system are made to the following categories of users for the purposes stated:

- A. Other Federal law enforcement and regulatory agencies for law enforcement and regulatory purposes.
- B. State and local law enforcement and regulatory agencies for law enforcement and regulatory purposes.

EFFECT. Failure to report theft or loss of Listed Chemicals may result in penalties under 21 U.S.C. § 842 and § 843 of the Federal Criminal Code.

Type of Report: *(check one box only)*☒ New Report☐ Amendment Key *(prior report dated):* 23ZZG1CAEUQM

1. DEA Registration Number: BC2462707

Name of Business: CARR-GOTTSTEIN FOODS, CO.

Address: 7731 E NORTHERN LIGHTS BLVD

City: ANCHORAGE

State: AK

ZIP Code: 99504

Point of Contact: MELISSA PAGE

Email Address: S1817C01@CARRSQC.COM

Phone No.: 9073391760

Date of the Theft or Loss *(or first discovery of theft or loss):* October 27, 2022

Number of Thefts and Losses in the past 24 months: 1

Principal Business of Registrant: CHAIN PHARMACY

2. Type of theft or loss: PACKAGING DISCREPANCY:

3. Loss in Transit. *(*Fill out this section only if there was a loss in transit, or hijacking of transport vehicle.)*

Name of Common Carrier:

Telephone Number of Common Carrier:

Package Tracking Number:

Have there been losses in transit from this same carrier in the past?

☐ No☐ Yes *(If yes, how many, excluding this theft or loss?):*

Was the package received and accepted by the consignee?

☐ No☐ Yes *(If yes, the consignee is responsible for reporting the theft or loss.)*

If the package was accepted by the consignee, did it appear to be tampered with?

☐ No☐ Yes

Name of Consignee / Supplier:

*Enter the Name of Consignee (if reported by the supplier), or the Name of Supplier (if the package was accepted by the consignee).**If the consignee does not have a DEA Registration Number, e.g. if this was a shipment to a patient, or a nursing home emergency kit, enter "Patient" or "Nursing Home Kit."*

DEA Registration Number of Consignee / Supplier:

*Enter the DEA Registration Number of Consignee (if reported by the supplier), or DEA Registration Number of Supplier, (if the package was accepted by the consignee). If the controlled substances were shipped to a non-registrant, leave blank, unless a registered pharmacy shipped to an emergency kit held on site at a nursing home. In this case, the supplying pharmacy is required to report the theft or loss.*4. If this was a robbery, were any people injured? ☐ No ☐ Yes *(If yes, how many?):* Were any people killed? ☐ No ☐ Yes *(If yes, how many?):*

5. Purchase value to Registrant of controlled substances taken?: \$ 1

6. Were any pharmaceuticals or merchandise taken? ☒ No ☐ Yes *(Est. Value):*

7. Was theft reported to Police?

☒ No☐ Yes *(If yes, fill out the following information):*

Name of Police Department:

Police Report number:

Name of Responding Officer:

Phone No.:

8. Which corrective measure(s) have you taken to prevent a future theft or loss?

☐ Installed monitoring equipment (e.g. video camera).☐ Increased employee monitoring (e.g. random drug tests).☐ Installed metal bars or other security on doors or windows.☐ Secured Controlled Substances within safe.☒ Other *(Please describe on last page).*☐ Provided security training to staff.☐ Requested increased security patrols by Police.☐ Hired security guards for premises.☐ Terminated employee.

Report of Theft or Loss of Controlled Substances

OMB No. 1117-0001 (Exp. Date 7/31/2023)

U.S. Department of Justice
Drug Enforcement Administration
Diversion Control Division



LIST OF CONTROLLED SUBSTANCES LOST

[illegible]



9. What identifying marks, symbols, or price codes were on the labels of these containers that would assist in identifying the products?:

10. If Official Controlled Substance Order Forms (DEA-222) were stolen, give numbers:

Describe any other corrective measure(s) you have taken to prevent a future theft or loss:

PHARMACY WILL AUDIT ZOLPIDEM 5 MG EVERY MONTH, BACK COUNT, AND DOCUMENT ON MFG BOTTLES AFTER EACH FILL WILL BACK COUNT ALL THE PRESCRIPTIONS FOR THE NEXT 6 MONTHS OR UNTIL THE CAUSE OF THE LOSS HAS BEEN DETERMINED.

Enter remarks, if required. Description of how theft or loss occurred. Attach a separate sheet, if necessary:

DUE TO THE VARIANCE DISCOVERED AND THE FREQUENCY OF DISPENSING OF THIS PRODUCT, WE HAVE NO EVIDENCE TO SUPPORT ANY OTHER EXPLANATION FOR THIS LOSS.

The foregoing information is correct to the best of my knowledge and belief: By signing my full name in the space below, I hereby certify that the foregoing information furnished on this DEA Form 106 is true and correct, and understand that this constitutes an electronic signature for purposes of this reporting requirement only.

Signature: MELISSA PAGE

Title: PHARMACIST

Date Signed: November 08, 2022

NOTICE: In accordance with the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this collection of information is 1117-0001. Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Freedom of Information: Please prominently identify any confidential business information per 28 CFR 16.8(c) and Exemption 4 of the Freedom of Information Act (FOIA). In the event DEA receives a FOIA request to obtain such information, DEA will give written notice to the registrant to obtain such information. DEA will give written notice to the registrant to allow an opportunity to object prior to the release of information.

Privacy Act Information

AUTHORITY: Section 301 of the Controlled Substances Act of 1970 (PL 91-513).

PURPOSE: Reporting of unusual or excessive theft or loss of a Controlled Substance.

ROUTINE USES: The Controlled Substances Act authorizes the production of special reports required for statistical and analytical purposes. Disclosures of information from this system are made to the following categories of users for the purposes stated:

A. Other Federal law enforcement and regulatory agencies for law enforcement and regulatory purposes.

B. State and local law enforcement and regulatory agencies for law enforcement and regulatory purposes.

EFFECT: Failure to report theft or loss of Controlled Substances may result in penalties under Section 402 and 403 of the Controlled Substances Act.

From: [Matt Martineau](#)
Subject: District 8 Resolution
Date: Wednesday, October 26, 2022 6:50:15 AM
Attachments: [Renewal alignment resolution.docx](#)

You don't often get email from matt.martineau@wyo.gov. [Learn why this is important](#)

CAUTION: This email originated from outside the State of Alaska mail system. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good morning,

At the District 7 meeting in Oklahoma City, we (District 7) voted to co-support a resolution concept proposed by District 8 pertaining to alignment of licensure renewal cycles. District 8 has submitted the attached draft resolution to NABP. NABP reached out and asked if District 7 could reaffirm its support of the resolution. Please distribute to your members as appropriate and let Tony or me know on or before November 30th if you continue to support the resolution or not.

--

Matthew R. Martineau, PharmD, RPh
Executive Director
Wyoming State Board of Pharmacy

1712 Carey Avenue, Suite 200
Cheyenne, WY 82002
Telephone: (307) 634-9636
Fax: (307) 634-6335

In connection with the transaction of public business, e-mail to and from me is subject to the Wyoming Public Records Act and may be disclosed to third parties.

E-Mail to and from me, in connection with the transaction of public business, is subject to the Wyoming Public Records Act and may be disclosed to third parties.



Submission of District Resolutions to NABP

Resolutions adopted at the National Association of Boards of Pharmacy (NABP) Annual Meeting influence the policy and activity of NABP in the coming year. The Committee on Resolutions consists of eight members, one from each district, and said member formally represents the district at the Committee on Resolutions meeting. We ask that the delegate (and if needed, alternate) designated at the district meeting serving on the Committee on Resolutions meeting be a **current** board member at the time of the Annual Meeting.

Article IV Section 6 of the NABP Constitution states:

- (c) *The Committee on Resolutions will meet during the Annual Meeting of the Association to give due consideration of resolutions submitted to the Association, check against duplication or contradiction with past resolutions or policy adopted by this Association, refer all resolutions concerning examination procedures not previously so referred by the Executive Director/Secretary to the Advisory Committee on Examinations for report before submitting same to the Association, and put resolutions in proper phraseology and form before submitting them to the Association. All resolutions shall be submitted to the Association for consideration, with a committee recommendation to "pass," "not pass," or "no recommendation."*
- (d) *Any active member board, District, or committee of the Association may submit resolutions to the Association. Except as otherwise provided in subparagraph (c) of this section, all resolutions submitted in writing to the Association at least twenty (20) days prior to the date of the Annual Meeting shall be presented at the Annual Meeting for consideration. Resolutions not presented within such time limitations may be presented during the Annual Meeting and will be considered for adoption by the Association upon the affirmative vote of three-fourths (3/4) of those active member boards present and constituting a quorum.*

In order for each resolution from your district to retain its original intent throughout the review and revision process, please submit all substantive and Association-wide resolutions (those meant to be considered for adoption by the full NABP membership) in accordance with the NABP Constitution (Article IV, Section 6) utilizing this attached form. This form will also assist your district delegate to the Committee on Resolutions during the committee meeting.

We strongly encourage resolutions under consideration be submitted to the District Secretary/Treasurer and NABP **at least 20 days prior to each of the respective district meetings** in order to provide appropriate discussion at the district meeting. In order to avoid duplication or contradiction with past resolutions adopted by the Association, or to view examples of resolution language/format, we recommend visiting the Reports section of the NABP website to view past resolutions at:
<https://nabp.pharmacy/publications-reports/reports/resolutions>

RESOLUTIONS FORM FOR DISTRICT ____

Title of the Proposed Resolution: Identify challenges in aligning renewal cycles across the country for individuals and businesses.

Provide brief background information on the proposed resolution.

Many individuals hold multiple licenses across the country and each state the individual is licensed in has a different renewal cycle which may result in an administrative oversight that may cause the individual to be disciplined.

The same holds true to permits

What issue or need does this resolution attempt to address?

Identifying challenges to aligning renewals.

Is this actionable for NABP?

☒ Yes

☐ No

What is the desired outcome (ie, what specific action do you want NABP to achieve)?

To align as many states as possible to a standardized renewal cycle.

Is this in NABP's scope or sphere of influence?

☒ Yes

☐ No

Does this fit within the mission of NABP?

☒ Yes

☐ No

Mission Statement: NABP is the independent, international, and impartial association that assists its member boards and jurisdictions for the purpose of protecting the public health.

Proposed Resolution Language:

Whereas, Individuals and businesses are licensed or permitted in many states.

Whereas, Individuals and businesses have been disciplined for working/operating without a valid license/permit due to failure to renew timely.

Whereas, most if not all states have their own unique renewal cycle.

Therefore, be it resolved that NABP work with its member Boards and other stakeholders to identify challenges to align renewal cycle across the country or in as many states as possible.

Indicate the individual who will serve as the contact for the proposed resolution between the district meeting and the Committee on Resolutions meeting in May.

Kam Gandhi – (602) 694-1300



RECEIVED
Juneau
SEP 14 2022
CBPL

September 9, 2022

Laura Carrillo
Alaska Board of Pharmacy
PO Box 110806
Juneau, AK 99811-0806

Dear Laura Carrillo,

Earlier this year G.L.O. & Associates contacted you introducing our client, RxE2, and their program to transition clinical drug trials to a more patient focused, pharmacist-centric approach. The purpose of this additional outreach is to inform you of the program's continuing growth and expansion.

We want to maintain our connection with you, since our last outreach, in case there have been new developments, or you are considering changes that may be pertinent to this program. We continue to follow proposed state statutes and regulatory changes regarding pharmacist roles especially if they may affect investigational new drugs and their clinical trials. However, we want to ensure we have not missed a change or a concern of yours or another pertinent agency's in this space.

We have attached RxE2's overview of services to refresh your memory of the program should it be necessary. If any issues come to mind, we would appreciate the opportunity to transparently discuss the topic or area of concern. If you see no additional issues other than previously noted, and do not anticipate any in the foreseeable future, a brief note or email would also be appreciated.

Thank you for your time and attention to our client's pharmacist-centric initiative regarding investigational new drugs and related clinical trials.

My best,

Dr. George L. Oestreich, PharmD, MPA
President, Principal
george@gloetal.com



Incorporating the Practice of Pharmacy into Clinical Research

Overview of Services

RxE2 is a new and innovative pharmaceutical services organization focused on incorporating the practice of pharmacy into clinical research. RxE2 utilizes a small staff of highly skilled experts to build simple, adaptive, and cost-effective solutions that pharmacies and pharmacists can use to create a new paradigm for conducting clinical research. This new paradigm capitalizes on the relationship the pharmacist has with his or her patients and addresses the time, cost, and quality issues faced by the pharmaceutical and biotech industry.

To date, the role of the pharmacist in clinical research is almost non-existent. RxE2's goal is to change this and ensure that the pharmacist, as the medication expert, is involved in clinical research. Having the pharmacist oversee the dispensing and patient counseling of investigational drug will improve patient safety, compliance and adherence, and outcomes. RxE2 will also work with pharmacies and pharmacists to oversee protocol design, patient recruit and other aspects that would benefit from the expertise of the pharmacist.

RxE2 believes by involving the pharmacist timelines and associated costs will be reduced through three key areas: clinical supplies (E2 Dispensing), medication counseling (E2 Counseling), and the recruitment and enrollment of patients (E2 Recruitment). Once these services are proven, RxE2 will then launch E2 Trials, incorporating all three services as one offering while adding the ability for patient data collection. Quality will be improved through all three services, but it will be RxE2's E2 Counseling services that will have the biggest impact on quality, specifically the quality of clinical trial outcomes which will directly impact the number of medications gaining approval by the FDA. This basic and simple service will revolutionize clinical research and have far-reaching implications for the industry.

E2 Dispensing is categorized as disruptive technology and will greatly reduce clinical supply timelines and costs by moving the packaging, labeling, and dispensing of clinical supplies to a central-fill pharmacy. The central-fill pharmacy dispenses the medication directly to the patient, healthcare provider, or local pharmacy, where allowed. This disruptive innovation eliminates the costs and waste associated with the packaging and labeling of clinical supplies at a GMP facility and the costs and waste due to the handling and dispensing of clinical supplies by clinical sites. Quality is improved as clinical supplies are labeled according to state pharmacy laws rather than GMP manufacturing regulations.

E2 Counseling will improve the quality and outcomes of clinical trials by using pharmacists - the medication experts - to counsel patients who received their medication through E2 Dispensing. Pharmacist counseling improves compliance and adherence as well as overall

patient retention. Outside of RxE2, patient counseling is currently non-existent in the clinical trial industry. E2 Counseling impacts the quality of medication compliance by the patients enrolled, the patient data collected, and subsequently the data filed in the New Drug Application (NDA). E2 Counseling ultimately affects the pharmaceutical industry's primary problem of medication failures which drives the ever-increasing cost of clinical trials.

E2 Recruitment will reduce timelines and costs through its unique pharmacy-focused model which engages the role of the pharmacist and his or her relationship with patients. Most importantly, the E2 Recruitment model decentralizes clinical research and brings the option of participating in a clinical trial to patients everywhere. Quality is improved by RxE2 centralizing and standardizing the recruitment process for all pharmacies, ensuring screened patients better meet protocol requirements.

E2 Trials incorporates all RxE2 services. E2 Trials will decrease timelines, decrease costs, and improve overall quality of clinical trials. Every aspect of pharmaceutical clinical research, including the way the industry views its resources, processes, and values will be impacted. The change brought about by RxE2 will be unprecedented and disruptive simply by incorporating the practice of pharmacy into clinical research.

Mission and Vision

Mission

RxE2 will make clinical trials a healthcare option for everyone everywhere by incorporating the practice of pharmacy and leveraging the expertise of the pharmacist.

Vision

RxE2 seeks to continually improve patient care and health outcomes by providing the education, training, and support for local pharmacies and pharmacists to participate in clinical trials. RxE2 will provide local pharmacies the opportunity to participate in a new revenue stream that does not disrupt their current practice, and in fact, will utilize their current practice and their long-term relationship with their patients. Patients trust their pharmacists and surveys show patients want to participate in clinical trials, but rarely do. RxE2, for the first time in the industry, will use the local pharmacist to reach a more diverse and dispersed patient population and address the concerns of the patients by providing them with the opportunity and assistance to take the next step and participate in clinical trials. Presently, pharmaceutical companies use clinical sites that are often only found in the big cities or large academic hospitals which focus only on their sub-populations. Our vision focuses on high-quality care for every patient everywhere, beginning with clinical trials in the US and North America and extending into the global setting, especially in those countries with a strong independent community pharmacy presence.

From: [Kelly DiBattista, Esq.](#)
To: [Board of Pharmacy \(CED sponsored\)](#)
Subject: Title Model
Date: Thursday, September 15, 2022 12:34:05 PM
Attachments: [image001.png](#)
[image002.png](#)

CAUTION: This email originated from outside the State of Alaska mail system. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good Afternoon,

Would Alaska require a license for a nonresident virtual manufacturer engaged in “title model” with a 3PL? In this situation the virtual passes title to the 3PL before the product enters the state. So the virtual may appear on the label, but it is not directing the sale into the state. I find a lot of the rules and regulations aren’t spot on when it comes to this topic hence why I am reaching out directly.

Thanks in advance.

Kelly DiBattista, Esq., Research Manager
email: kelly.dibattista@pharma.solutions
office: 484-800-1863
direct: 610-298-5406

[LinkedIn](#)

[Schedule a meeting with me in Microsoft Bookings!](#)



This email may be confidential and privileged. If you have received this communication in error, please do not forward it to anyone else, please erase all copies and attachments, and please let me know that it has gone to the wrong person. The above terms may reflect a potential business arrangement, are provided solely as a basis for further discussion, and are not intended to be and do not constitute a legally binding obligation. No legally binding obligations will be created, implied, or inferred until an agreement in final form is executed in writing by all parties involved. This communication additionally does not create or imply an attorney-client relationship or privilege.

From: [Ashley N. Bolyard](#)
To: [Carrillo, Laura N \(CED\)](#)
Subject: Recommendations for Tech to Tech Check (Final Check) Implementations
Date: Wednesday, November 9, 2022 3:02:35 PM

You don't often get email from abolyard@bartletthospital.org. [Learn why this is important](#)

CAUTION: This email originated from outside the State of Alaska mail system. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Greetings,

Bartlett Regional Hospital Pharmacy seeks recommendations/guidance from the State of Alaska Board of Pharmacy regarding implementation and/or training for Tech to Tech check (final check). We understand this process would be for any pharmacy technician with national certification and for non-controlled medications placed in an ADC using barcode scanning.

We look forward to hearing any guidance from the Board of Pharmacy.

Thank you,

Ashley Bolyard CPht-Adv, CSPT

Pharmacy Tech Program Specialist

Bartlett Regional Hospital 3260 Hospital Drive Juneau, AK 99801

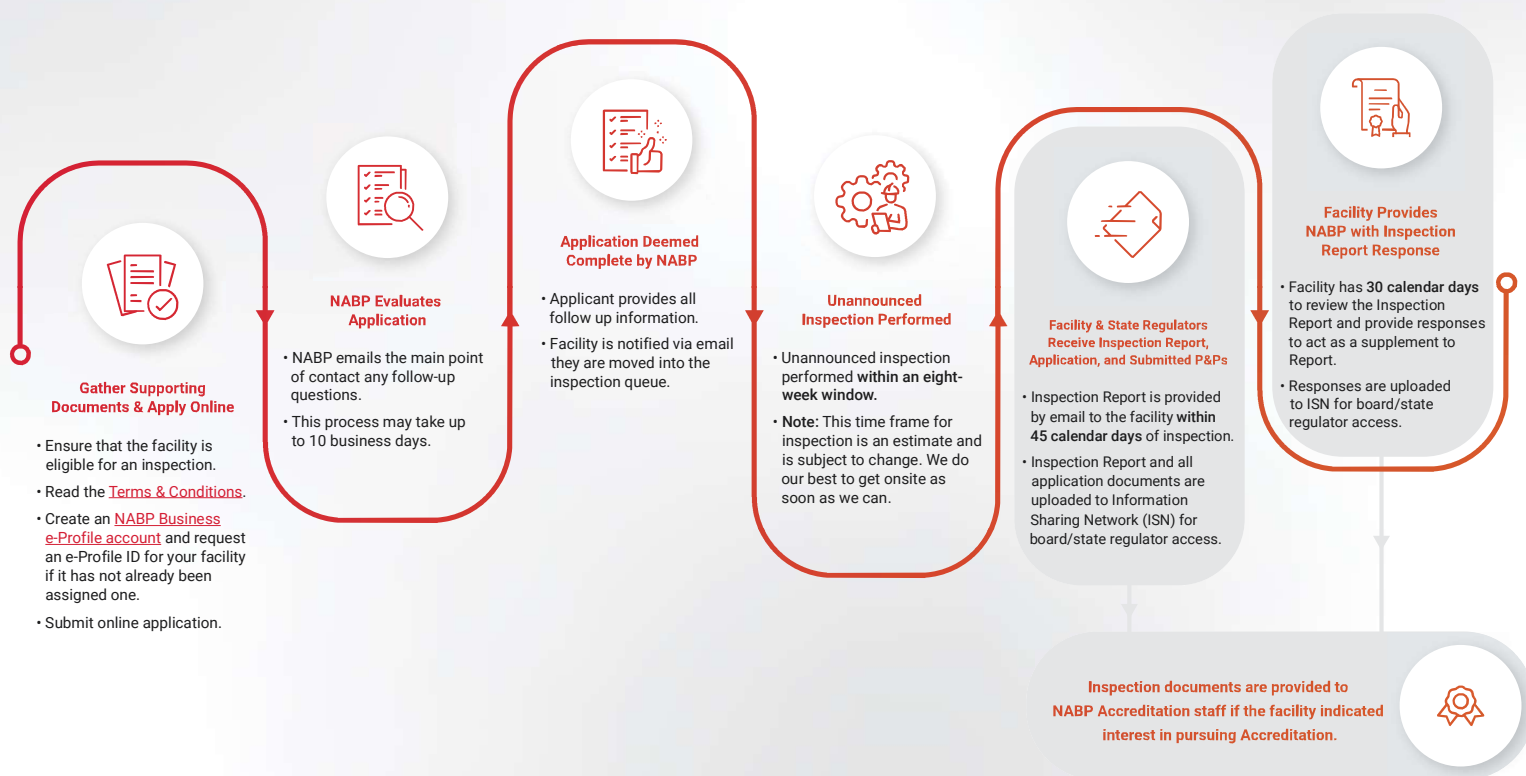
Phone: (907)796-8412 Fax: (907)796-8443

abolyard@bartletthospital.org



NABP INSPECTION PROCESS

Take a closer look at the Verified Pharmacy Program and Supply Chain Inspection process before you apply.



Additional details may be found on our website [FAQ section](#).

Office of Governor
MIKE DUNLEAVY

You are here: [Home](#) / [Services](#) / [Boards and Commissions](#) / Fact Sheet

Fact Sheet

Board: Controlled Substances Advisory Committee

Board identification number: 272

Department: LAW

Authority: AS 11.71.100

Status: Active

Sunset date:

Requirements: No Legislative Confirmation or Financial Disclosure required

Prohibitions: None

Term: 4 years

Chair: The president of the Board of Pharmacy or the president's designee is the chair of the committee

Description: The committee consists of 9 members: the Attorney General or the Attorney General's designee; the Commissioner of Health and Social Services or the Commissioner's designee; the Commissioner of Public Safety or the Commissioner's designee; the President of the Board of Pharmacy or the designee of the President who shall also be a member of the Board of Pharmacy; a peace officer appointed by the Governor after consultation with the Alaska Association of Chiefs of Police; a physician appointed by the Governor; a psychiatrist appointed by the Governor; and two individuals appointed by the Governor.

Function: To evaluate the effectiveness of current programs, budget and appropriations, enforcement policies and procedures, treatment, counseling, and regulations regarding controlled substances and to further make recommendations to the Governor, Alaska Court System and Legislature based upon its findings.

Special facts: Five members of the committee constitute a quorum, except that a smaller number may adjourn a meeting in the absence of a quorum.

Compensation: Standard Travel and Per Diem

Meetings: To be held at the call of the chairman, and are required to meet at least twice a year.

For further information and to reach individual members, contact:

[Katholyn Runnels](#)

Assistant Attorney General

310 K Street, Suite 601

Anchorage, AK 99501

Phone: 907-269-6250

Fax:

[Board Roster](#)

From: [Janso, Lisa](#)
Subject: District 7 Well-being Index for Pharmacy Personnel Reports
Date: Tuesday, October 25, 2022 1:29:23 PM
Attachments: [image001.png](#)
[image002.png](#)
[image003.png](#)
[image004.png](#)
[image005.png](#)
[NABP State Report - District 7 - Oct 2022.pdf](#)

CAUTION: This email originated from outside the State of Alaska mail system. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good afternoon,

Well-being Index Report

Attached is the October Well-being Index (WBI) for Pharmacy Personnel report for your district. This month, several states have had an increase in assessors.

New this month are two slides on the WBI resources that have been accessed since July 2019 compared to the resources for just this year. The frequency of the resources categories accessed may help to inform the type of well-being programs/activities that could be offered or addressed. Unfortunately, we cannot get data on each of the specific resources in each category but hope that this more general information is useful.

National Academy of Medicine - National Plan for Health Workforce Well-being

Earlier this month, the National Academy of Medicine (NAM) released the National Plan for Health Workforce Well-being. The Plan includes seven priority areas, many of which apply to pharmacy practice. You can read or download (free) the Plan and its highlights [here](#). Each priority has a short description, additional resources, and charts with action items and the organization types that are called out to address them. APhA issued a statement applauding NAM and its work on health worker well-being. The release is available [here](#).

The [APhA/NASPA Pharmacist's Fundamental Responsibilities & Rights](#) is listed as a resource under the Plan's Priority One. APhA sends its thanks to the state boards of pharmacy that have already supported the *Fundamentals*.

If you are interested in specific state data that is not included in the report (demographics, practice role, etc), please contact APhA's April Shaughnessy at ashaughnessy@aphanet.org.

Best regards,
Lisa

Lisa Janso, MS
Executive Committee Manager

847/391-4462

National Association of Boards of Pharmacy

1600 Feehanville Dr, Mount Prospect, IL 60056

www.nabp.pharmacy | ljanso@nabp.pharmacy





Well-being Index For Pharmacy Personnel

State Report
For State Boards of Pharmacy
NABP District Seven States

OCTOBER 2022

For Every Pharmacist. For All of Pharmacy.

Well-being Index Resources Accessed

July 2019 to October 2022 and January 2022 to October 2022

Well-being Index for Pharmacy Personnel *Resources Accessed*

When individuals complete their WBI, they are directed to resources under 9 categories.

Since its launch, the assessors using the WBI for Pharmacy Personnel accessed resources under Stress & Resiliency the most often. In 2022 to date, the same category of resources was also the most accessed. A breakdown of resources accessed follows in the next slide.

The frequency of categories accessed, can be used to inform planning for resources and programming developed/offered by state associations and state boards of pharmacy.



Well-being Index for Pharmacy Personnel

Resources Accessed – Percentage of All Views

Resource Categories	July 2019 through October 2022	January throu October
Stress & Resiliency	34%	32%
Relationships & Work-life Balance	16%	17%
Emotional Concerns	14%	15%
Career Development	12%	15%
Fatigue	8%	6%
<i>Suicidal Thoughts</i>	8%	3%
<i>Health Behavior</i>	5%	9%
Money / Financial	2%	2%
Alcohol / Substance Use	1%	1%

DISTRESS PERCENT CHANGES
National and District
September 2022 versus October 2022

Changes in Distress Lev

As of October 2022

State	Change in Distress % September 2022 vs October 2022	Distress October
Largest Increase in Distress Percent		
Wyoming	+3.33%	20.00
Arkansas	+2.63%	30.58
South Dakota	+1.47%	26.47
Maine	+1.02%	19.05
Alaska	+0.50%	31.17
Largest Decrease in Distress Percent		
Puerto Rico	-2.14%	42.86
Tennessee	-1.02%	29.77
Utah	-0.68%	29.85
Idaho	-0.55%	33.06
Florida	-0.47%	34.34
NATIONAL	-0.06%	31.99

Changes in Distress Levels – District Sever

As of October 2022

	Change in Distress % Oct 2022 Vs Sep 2022	Distress % Oct 2022	Distress % State Rank Oct 2022	Change in Distress % Sep 2022 Vs Aug 2022	Distress % State Rank Sep 2022	Distress % State Rank Aug 2022	Distress % State Rank Jul 2022	Distress % State Rank Jun 2022	Distress % State Rank May 2022	Distress % State Rank Apr 2022
Alaska	0.50%	31.17%	35	0.11%	38	38	39	38	38	33
Idaho	-0.55%	33.06%	31	No Change	26	25	24	22	22	27
Montana	No Change	40.63%	11	No Change	11	11	11	10	11	11
Oregon	-0.16%	33.17%	30	0.34%	29 (T)	31	27 (T)	28	31	29
Washington	-0.34%	42.34%	8	0.06%	8	8	9	8	8	9
Wyoming	3.33%	20.00%	51	-0.72%	52	52	52	52	52	52

(T) = Tied rank with another state(s).

Note: Some historic data from 2020/2021/2022 has been removed to allow space for current month. Refer to previous months' reports or contact ashaughnessy@aphanet.org for data.

DISTRESS PERCENT MONTHLY REPORT

State-Specific

September 2022 versus October 2021

WELL-BEING INDEX FOR PHARMACISTS

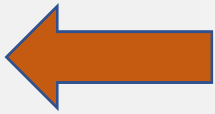
STATE DISTRESS PERCENT

OCTOBER 2022



As of October 6, 2022, the Alaska distress percent was 31.37% (ranked 35/52) with 49 assessors.

SEPTEMBER 2022



As of September 6, 2022, the Alaska distress percent was 30.67% (ranked 38/52) with 49 assessors.

A large orange arrow pointing to the left, containing the text "30.67%".

30.67%

STATE COMPARISON



As of October 6, 2022

Nevada is the highest at 59.74% (n=33)

Maine has the lowest 19.05% (n=26)



*Distress Percent is the percentage of individuals with a Well-Being Index (WBI) score ≥ 5 . It measures the percent of individuals that are at a high level of distress.

WELL-BEING INDEX FOR PHARMACISTS

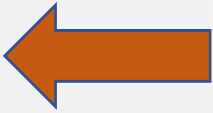
STATE DISTRESS PERCENT

OCTOBER 2022

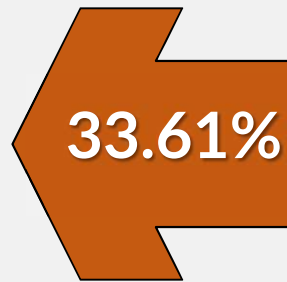


As of October 6, 2022, the Idaho distress percent was 33.06% (ranked 31/52) with 71 assessors.

SEPTEMBER 2022



As of September 6, 2022, the Idaho distress percent was 33.61% (ranked 26/52) with 69 assessors.



STATE COMPARISON

As of October 6, 2022

Nevada is the highest at 59.74% (n=33)

Maine has the lowest 19.05% (n=26)

**Distress Percent* is the percentage of individuals with a Well-Being Index (WBI) score ≥ 5 . It measures the percent of individuals that are at a high level of distress.

WELL-BEING INDEX FOR PHARMACISTS

STATE DISTRESS PERCENT

OCTOBER 2022

As of October 6, 2022, the Montana distress percent was 40.63% (ranked 11/52) with 26 assessors.

SEPTEMBER 2022

As of September 6, 2022, the Montana distress percent was 40.63% (ranked 11/52) with 26 assessors.

40.63%



STATE COMPARISON

As of October 6, 2022

Nevada is the highest at 59.74% (n=33)

Maine has the lowest 19.05% (n=26)



*Distress Percent is the percentage of individuals with a Well-Being Index (WBI) score ≥ 5 . It measures the percent of individuals that are at a high level of distress.

WELL-BEING INDEX FOR PHARMACISTS

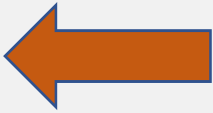
STATE DISTRESS PERCENT

OCTOBER 2022



As of October 6, 2022, the Oregon distress percent was 33.17% (ranked at 30/52) with 101 assessors.

SEPTEMBER 2022



As of September 6, 2022, the Oregon distress percent was 33.33% (ranked tied at 29/52) with 98 assessors.



33.33%



STATE COMPARISON

As of October 6, 2022

Nevada is the highest at 59.74% (n=33)

Maine has the lowest 19.05% (n=26)



**Distress Percent* is the percentage of individuals with a Well-Being Index (WBI) score ≥ 5 . It measures the percent of individuals that are at a high level of distress.

WELL-BEING INDEX FOR PHARMACISTS STATE DISTRESS PERCENT

OCTOBER 2022

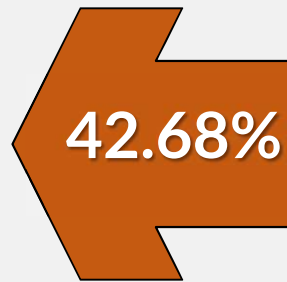


As of October 6, 2022, the Washington distress percent was 42.34% (ranked 8/52) with 159 assessors.

SEPTEMBER 2022



As of September 6, 2022, the Washington distress percent was 42.68% (ranked 8/52) with 159 assessors.



STATE COMPARISON

As of October 6, 2022



Nevada is the highest at 59.74% (n=33)

Maine has the lowest 19.05% (n=26)

**Distress Percent* is the percentage of individuals with a Well-Being Index (WBI) score ≥ 5 . It measures the percent of individuals that are at a high level of distress.

WELL-BEING INDEX FOR PHARMACISTS

STATE DISTRESS PERCENTAGE

OCTOBER 2022



As of October 6, 2022, the Wyoming distress percent was 20.00% (ranked the lowest at 51/52) with 17 assessors.

SEPTEMBER 2022



As of September 6, 2022, the Wyoming distress percent was 16.67% (ranked the lowest at 52/52) with 17 assessors.

16.67%



STATE COMPARISON

As of October 6, 2022



Nevada is the highest at 59.74% (n=33)

Maine has the lowest 19.05% (n=26)

**Distress Percent* is the percentage of individuals with a Well-Being Index (WBI) score ≥ 5 . It measures the percent of individuals that are at a high level of distress.

Well-being Resources Promo Slides*

For Your Use in State Social Media and Periodicals

**Please do not change the content of these promotional slides*



Burnout is real.

Take advantage of APhA's online screening tool, invented to evaluate your fatigue, depression, burnout, anxiety, and stress.

It takes less than 5 minutes to answer 9 short questions.

It's 100% anonymous, free, and you do not need to be a pharmacist.

Resources are available once you submit your assessment.

Well-being Index for Pharmacists, Student Pharmacists, & PharmD Programs

<https://app.mywellbeingindex.org/signup>

Invitation Code: APhA

Or Scan





Your experiences – positive and negative – tell

**Your experience can be the spark that helps change
the pharmacy workplace, pharmacy personnel well-being**

**Submit your experience report to
Pharmacy Workplace and Well-being Report
www.pharmacist.com/pwwr**

**Your report is confidential, anonymous, and protected
Alliance for Patient Medication Safety - a recognized national**

Share the PWWR link with your colleagues

From: [Schaber, Ashley R](#)
To: [Carrillo, Laura N \(CED\)](#)
Cc: ["Justin Ruffridge"](#)
Subject: FW: Reminder! Submit today!
Date: Wednesday, October 19, 2022 10:40:52 AM

CAUTION: This email originated from outside the State of Alaska mail system. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hi Laura,

I know the Board of Pharmacy usually has a presentation at the AKPhA convention, so I wanted to make sure this was discussed/sent forward for approval.

Ashley

From: Brandy Seignemartin, Executive Director <akpharmacistsassociation@gmail.com>
Sent: Wednesday, October 19, 2022 10:27 AM
To: Schaber, Ashley R <arschaber@anthc.org>
Subject: Reminder! Submit today!

WARNING: This email originated outside of ANTHC from **bounce-63504175faf6ea7ddbd937ed@bounces.neonemails.com**.

CAUTION: Do not click on links or open attachments unless you recognize the sender and trust these links or attachments are safe. Report all suspicious emails using the **Phish Alarm button** in Outlook.

If you're having trouble viewing this email, you can [see it online](#).

Reminder:

Submit your presentation proposal today!

Proposals are currently being accepted for presentations at the [AKPhA Annual Convention & Tradeshow](#), February 17-19, 2023 at the Hilton Anchorage.

Please submit your proposal for a CE presentation here (deadline 11/1): <https://alaskapharmacy.org/callforpresenters-2023/>
*Bio and CV are required pieces of the proposal submission packet.

Please submit your proposal here for a poster presentation here: <https://alaskapharmacy.org/2023conventionposter/>

LCDR Kristin Allmaras, kristin.allmaras@ihs.gov, is serving as our convention chair this year, please contact her with questions.

Also, don't forget to nominate a deserving colleague for an award:

Deadline for submission is December 1, 2022.

See award info and call for awards here: [CALL FOR YEAR 2023 AWARD NOMINATIONS](#)

Nominate a colleague here: [Member Awards – Alaska Pharmacists Association \(alaskapharmacy.org\)](#)

CDR Brittany Keener, blkeener@anthc.org, is serving as chair of our nominations committee this year, please contact her with questions.

Interested in guiding our profession into the future?

We need pharmacists like YOU on our Board of Directors. As a board member you will help guide our association and profession in Alaska. Nominate yourself or a colleague for a board position that is coming open in 2023. We will install our 2023 Board of Directors at the [Annual Convention & Tradeshow](#).

Nominate here: <https://alaskapharmacy.org/2022/10/board-nominations/>

Dr. Renee Robinson, reneerobinson@isu.edu, is our current President and Chair of the Board. Please contact her with any questions about nominations to the Board of Directors.

Registration opens soon! Mark your calendars.

This email was sent to arschaber@anthc.org. [Click here to unsubscribe.](#)

Proposed Statute Changes November 2022

Statutory Area	Citation	Proposed Change	Summary of change	Additional Information/Discussion
Qualifications for Licensure by Examination	AS 08.80.110(2)	[FURNISH THE BOARD WITH AT LEAST TWO AFFIDAVITS FROM REPUTABLE CITIZENS THAT THE APPLICANT HAS KNOWN FOR AT LEAST ONE YEAR ATTESTING TO THE APPLICANT'S GOOD MORAL CHARACTER;]	Remove moral character requirement from applications for pharmacists via examination.	Not required in Medical Board, Dental, or Nursing Statutes. 12 AAC 52.075 defines good moral character as not having been convicted of a felony or other crime which may impact ability to practice competently and safely. This is duplicate, as it's covered in 08.80.261(4) and corresponding regulations.
RECIPROCITY; LICENSE TRANSFER.	AS 08.80.145(3)	[(3) IS OF GOOD MORAL CHARACTER;]	Remove character requirement from applications for pharmacists via reciprocity; license transfer.	Not required in Medical Board, Dental, or Nursing Statutes. 12 AAC 52.075 defines good moral character as not having been convicted of a felony or other crime which may impact ability to practice competently and safely. This is duplicate, as it's covered in 08.80.261(4) and corresponding regulations.
Reciprocity; License Transfer	AS 08.80.145(5)	["OR HAS MET THE INTERNSHIP REQUIREMENTS OF THIS STATE"]	Internship requirements (ex:1500 hours) do not need to be spelled out- this is a national standard across pharmacy schools	
Creation and Membership of Board; Officers	AS 8.80.030(a)	There is created the Board of Pharmacy, composed of seven members, five of whom shall be pharmacists licensed in the state who have been actively engaged in the practice of pharmacy in the state for a period of three years immediately preceding their appointment. <u>One shall be a pharmacy technician licensed in the state for at least two years</u> <u>[TWO]</u> <u>One</u> shall be a person[S] with	Add technician board seat; remove one public member.	Aligns with multiple other states, including Arizona (rule §32-1902), Montana rule §24.174, North Dakota, and Utah (§58-17b-1r) which now include a nationally certified technician board seat to better represent pharmacy overall. Aligns with AK Medical Board which includes a seat for a PA (AS 08.64.010). Aligns with AK Nursing Board which includes seats for an LPN, RNs, APRNs (08.68.010).

Proposed Statute Changes November 2022

Statutory Area	Citation	Proposed Change	Summary of change	Additional Information/Discussion
		no direct financial interest in the health care industry. Whenever possible, the board shall include at least one member from each judicial district.		
Powers and Duties of the Board	AS 08.80.030(b)(10)	<u>[ISSUE LICENSES TO PERSONS ENGAGED IN THE MANUFACTURE AND DISTRIBUTION OF DRUGS AND DEVICES] license and regulate the qualifications of entities engaged in the manufacture of drugs and related devices</u> ADD AS 08.80.030(b)__: <u>license and regulate the qualifications of entities engaged in the distribution of drugs and related devices</u>	Amending (10) covers manufacturers. Adding new language covers distributors.	Separate out manufacturing and distributing (current language is interpreted to read that the board must regulate an entity which does both, rather than being mutually exclusive).
Powers and Duties of the Board	AS 08.80.030(b)(17)	NEW: " <u>license and establish standards for automated prescription drug machines installed outside the premise of institutional facilities</u> "		*Need clarification/ more discussion with Board License kiosks?? Arizona? Need example of when this would be used. Distinction between <i>distribution</i> and <i>dispensing machines</i> discussed during Nov. 18, 2021 meeting (page 14): https://www.commerce.alaska.gov/web/Portals/5/pub/PHAdminutes_2021_11.pdf What is the distinction between/how does this relate to emergency drug/first dose kits in 12 AAC 52.830 - .840. Discussed at Feb. 17-18, 2022 meeting (pgs. 13 – 14)? https://www.commerce.alaska.gov/web/Portals/5/pub/PHAdminutes_2022_02.pdf
Powers and Duties of the Board	AS 08.80.030(b)(14)	"require that a licensed pharmacist <u>dispensing federally-scheduled controlled substances in the state</u> register with the	Clarify that only pharmacists who dispense federally-	Clarifies the statutory obligation to register only applies to pharmacists dispensing controlled substances in the state. Aligns with 12 AAC 52.885(b): "A licensed pharmacist practicing in this state shall register with the PDMP. Registration must be

Proposed Statute Changes November 2022

Statutory Area	Citation	Proposed Change	Summary of change	Additional Information/Discussion
		controlled substance prescription database under AS 17.30200(o)"	scheduled controlled substances need to register with the PDMP	completed not later than 30 days after initial licensure if the pharmacist's practice is expected to involve dispensing a schedule II, III, or IV controlled substance under federal law. If not dispensing in this state, a pharmacist shall submit, not later than 30 days after initial licensure, a PDMP dispensation exemption form provided by the board. A pharmacist who submitted a dispensation exemption form shall register with the PDMP before dispensing a schedule II, III, or IV controlled substance under federal law in this state"
Powers and Duties of the Board	AS 08.80.030(b)(16)	(16) license [and inspect] the facilities of wholesale drug distributors, third-party logistics providers, and outsourcing facilities, <u>and manufacturers</u> located outside the state under AS 08.80.159, <u>and pharmacies under AS 08.80.157 that are physically located outside the state</u>	*Remove "inspect" since inspections are not completed out of state. *Add "manufacturer" to this list to align with DSSCA.	*Need clarification/ more discussion with Board License rather than register out-of-state pharmacies **Need to determine if the Board would like the Investigative Unit to conduct inspections out-of-state? If the board wants to authorize/direct INV to perform inspections, it would not require a statute change. If the board wants to remove inspection language, would require a statute change. If so, this will need to be clear in regulation and on the record. AS 08.80.159(c)(1), states "may." Should this be- - complaint-driven inspection? - random inspection? - inspection required for initial application? *Laura has question out to Greg regarding budget and details. *How does NABP inspection play in? Awaiting more info
Powers and Duties of the Board	AS 08.80.030(b)(18)	NEW: ["establish standards for the practice of white and brown bagging"]		AKPhA hoping to address this in AS 21 – insurance statutes and hopefully eliminate the practice. Possible to restrict/limit in AS 08.80 as well at the pharmacy level – discuss at Nov meeting
Powers and Duties of the Board	AS 08.80.030(b)(19)	NEW: ["license Internet pharmacies providing services to residents in the State"]	Add license type of internet pharmacy	Issues currently include: unsure of which pharmacies are operating as Internet pharmacies, concern with counterfeit medications, opportunity to utilize the NABP's VPPs program. Discussed at multiple meetings: ▪ May 20 – 21, 2021 (p. 26)

Proposed Statute Changes November 2022

Statutory Area	Citation	Proposed Change	Summary of change	Additional Information/Discussion
				https://www.commerce.alaska.gov/web/Portals/5/pub/PHMinutes_2021_05.pdf ■ September 23 – 24, 2021 (p. 32) https://www.commerce.alaska.gov/web/Portals/5/pub/PHMinutes_2021_09.pdf ■ November 18, 2021 (p. 18) https://www.commerce.alaska.gov/web/Portals/5/pub/PHMinutes_2021_11.pdf ■ February 17 – 18, 2022 (pgs. 33 – 34) https://www.commerce.alaska.gov/web/Portals/5/pub/PHMinutes_2022_02.pdf
Powers and Duties of the Board	AS 08.80.030(b)20	NEW: <u>adopt regulations pertaining to retired pharmacist status</u>	Add authority of the board to adopt regulations regarding retired pharmacists.	*Aligns with AK Medical (08.64.276(a)), Nursing (08.68.100(c)), and Chiropractic Boards. *Aligns with multiple other states. Example from Oregon: (3)(a) All pharmacists in good standing who have been licensed pharmacists for at least 20 years and who are retired from practice of pharmacy are exempt from further payment of license fees until they again engage in the practice of pharmacy. No retired pharmacist shall engage in the practice of pharmacy without first paying all fees for the year in which the pharmacist resumes practice and producing evidence satisfactory to the board of continued professional competence.
Certain Advertising Prohibited	AS 08.80.420(a)	"A person may not use or exhibit the title "pharmacist," "assistant pharmacist," or "druggist," or the descriptive term "pharmacy," "drug store," "drug sundries," ["APOTHECARY"], or other similar title or term containing the word "drug," in any business premises, or in an advertisement through the media of press, or publication, or by radio or	Add term apothecary	Discussed at Nov 2021 Board of Pharmacy meeting; approved at Feb 2022 meeting

Proposed Statute Changes November 2022

Statutory Area	Citation	Proposed Change	Summary of change	Additional Information/Discussion
		television, unless the business has a licensed pharmacist in regular and continuous employment."		
Licensing and Inspection of Facilities Outside of the State	AS 08.80.159(a)	"Before shipping, mailing, mailing, distributing, or delivering prescription drugs to a licensee in the state or advertising in the state, a wholesale drug distributor, manufacturer , third-party logistics provider, or an outsourcing facility that is located outside of the state"	*Add "manufacturer" to this list to align with DSCSA.	
Fees	AS 08.80.130	registration or licensure of a facility classified under AS 08.80.157(b).		The board has limited enforcement/regulatory authority over out-of-state pharmacies (discipline them for technical/paperwork violations versus scope of practice violations) because they are <i>registered</i> rather than <i>licensed</i> in Alaska. Per dept. of law guidance from 2017: In 1992, the legislature enacted AS 08.80.158 to provide for some oversight of out-of state pharmacies that regularly ship, mail, or deliver prescription drugs to consumers in Alaska. But this registration requirement provides for oversight that is not as extensive as the board's oversight of in-state licensees. Registration of an out-of-state pharmacy is a type of license that gives businesses elsewhere authority to serve clients in Alaska based primarily on the strength of their licensure in their home jurisdictions. In AS 08.80.158(b)(2)-(3) you can see the legislature did not intend to substitute Alaska's Board for the licensing authority in the jurisdiction in which the out-of-state pharmacy is located. The overall vision of the drafters seems to have been to rely primarily on the home-state authorities of out-

Proposed Statute Changes November 2022

Statutory Area	Citation	Proposed Change	Summary of change	Additional Information/Discussion
				<p>of-state pharmacies to regulate those pharmacies. The legislative committee files include research and advice from Legislative Legal affirming that to rely on the primary licensing authority of the pharmacy's home jurisdiction was appropriate given that other states were regulating these pharmacies at least as strictly as Alaska's own standards. In keeping with this philosophy, the registration provision in statute expressly requires only a fairly limited array of information for registration, much of it devoted to ensuring that the pharmacy is in compliance with the pharmacy laws in its own jurisdiction. See <i>ITMO: Pharmacy Solutions, Inc.</i>, OAH no. 08-0344-PHA.</p> <p>▪ December 3 – 4, 2020 (p. 4)</p> <p>https://www.commerce.alaska.gov/web/Portals/5/pub/PHA_Mi_nutes_2020_12.pdf</p>
Executive Administrator of the Board	AS 08.80.270	<p>(a) The board shall employ an executive administrator to carry out the duties established under (b) of this section. The executive administrator is the principal executive officer of the board.</p> <p>The executive administrator is in the partially exempt service under AS 39.25.120 and is entitled to receive a monthly salary equal to a step in Range 23 on the salary schedule set out in AS 39.27.011(a).</p>	Remove salary range for executive administrator	<p>*Medical board employs an executive secretary. The salary range is the same as Board of Pharmacy EA (AS 08.64.103).</p> <p>*Nursing board employs an executive administrator who has to be a licensed nurse and have a master's degree. Salary is <u>not</u> specified in statute (AS 08.68.111)</p> <p>*Salary range was added after original bill (SB37, 2017-18) that created the EA was introduced- appears range 23 was added during the House finance committee hearing.</p> <p>https://www.akleg.gov/basis/Bill/Detail/30?Root=SB%20%2037#tab1_4</p> <p>*AS 39.27.120 (Partially Exempt Service) includes BOP EA but not a specific salary range. Refers to 39.27.011 which has general salary range scale.</p> <p>*Checked several states and a salary grade is not regularly specified. Here's Oregon's for example: 89.175 Compensation of board members and executive director. (1) Each member of the State Board of Pharmacy shall receive compensation for each day on which the member is engaged in performance of the official</p>

Proposed Statute Changes November 2022

Statutory Area	Citation	Proposed Change	Summary of change	Additional Information/Discussion
				duties of the board, and reimbursement for all expenses incurred in connection with the discharge of such official duties as provided in ORS 292.495. (2) The Executive Director of the State Board of Pharmacy shall receive, as compensation, an annual salary payable monthly, the amount of which shall be determined by the board, and reimbursement for all expenses incurred in connection with performance of official duties, subject to applicable law and to the rules of the Oregon Department of Administrative Services. [1979 c.777 §14]
Definitions	AS 08.80.480(21)	(21) "owner" means the owner of a place of business for wholesaling, retailing, compounding, or dispensing drugs, <u>or</u> medicines, [OR POISONS]	Remove "poisons"-	<p>*Need clarification/ more discussion with Board</p> <p>Need to discuss more and get DOL input re: poisons?? Poisons- not referenced anywhere in AS 08.80 or AS 17.20; not referenced in model NABP act. Significantly referenced in AZ and OR. Not referenced in ID.</p> <p>Laura's notes</p> <p>I met with AAG Dinegar, Sara, and Glenn regarding the statute definition of "owner" on 10/27/2022 and the implication it has on when an entity's ownership has changed. I've suggested to align with other states, e.g. Texas, to update our definition of ownership to not apply to the physical place of business but the <i>owner</i> of the company. I've also requested AAG Dinegar's assistance to craft a corresponding definition of "owner" or "change of ownership" to occur when an FEIN has changed. See example from Texas:</p> <p>A Change of Ownership is most commonly identified if the FEIN of the direct owner of the pharmacy has changed. A change of ownership does not occur when a corporation or LLC sells stock to another person, or changes officers and the same entity continues as the owner of the pharmacy license (i.e. no change to FEIN). However, this may result in a Change of Managing Officers. Managing Officers are defined as the top four executive officers of the entity that owns and operates the pharmacy.</p> <p>Suggestion: "owner" means a person or entity who is the legal operator of a licensed or registered pharmacy or facility and is</p>

Proposed Statute Changes November 2022

Statutory Area	Citation	Proposed Change	Summary of change	Additional Information/Discussion
				assigned a unique federal employer identification number (EIN) for the transaction of business. *Harriet following up with corporate law on this*
Definitions	AS 08.80.480(28)	"pharmacy <u>within United States</u> located outside of the state"		*Need clarification/ more discussion with Board Is this needed? Clarify the board does not have jurisdiction over non-US pharmacies who ship medication into the state. Not in the model NABP act or other states but the Board has discussed this and gotten a DOL opinion in the past. Possible to include in the AK Board of Pharmacy FAQs
National criminal history record checks for employment, licensing, and other noncriminal justice purposes.	AS 12.62.400	<u>licensure to practice pharmacy or licensure as a pharmacy technician under AS 08.80</u>		*Aligns with nursing requirements in AK and pharmacy requirements in other states. Also aligns with model NABP act. *Current list is expansive but doesn't include medical providers.

Proposed Statute Changes November 2022

From BOP Annual Report Approved at June 2022 meeting:

Statutory area	Summary of Change	Citation
Moral character	Remove moral character requirement from applications for pharmacists via examination and reciprocity	AS 08.80.110(2), AS 08.80.145(3)
Registration of pharmacies	Repeal registration and introduce a licensure category	AS 08.80.158
Requirements for non-resident pharmacies	Include devices, require licensure	AS 08.80.159
Licenses not affected	Drug dispensing machines	AS 08.80.400
Prohibited terms	Add "apothecary"	AS 08.80.420
Powers and duties of the board	Regulate the practice of white and brown bagging; regulate kiosks as a separate license type	AS 08.80.030
Creation and membership of board; officers	Add a technician seat; remove one public member seat	AS 08.80.010
National criminal history record check	Require FBI fingerprints for pharmacist applicants	AS 12.62.400

From Feb 2022 BOP meeting

1413 Board statute interests
1414 Ms. Carrillo stated there was some momentum a few years ago to get a statute project going, but at
1415 present there isn't a comprehensive and updated draft. Dr. Ruffridge recommended the board
1416 start working towards a statute draft to be ready by this summer to potentially ask for Governor
1417 Dunleavy's support, or alternatively, to have a project ready by the fall to seek legislative sponsors.
1418
1419 The board discussed the following topics but decided not to pursue further efforts at this time:

34

Alaska Board of Pharmacy
February 17-18, 2022 Meeting

1420
1421 Ⓢ National certification (New; board can require nationally certification of existing licensed
1422 technicians per LAW opinion)
1423 Ⓢ Equivalent drug products (AS 08.80.400; already in HB 145)
1424 Ⓢ Pharmacist reimbursement and recognition as providers (already in HB 145)
1425 Ⓢ The board identified the following areas to potentially build a statute project:
1426
1427 The board ultimately decided to pursue further efforts for the following:
1428
1429 ✓ Requiring licensure for out-of-state pharmacists (AS 08.80.030)
1430 ✓ Regulating Pharmacy/VIPPS Internet Programs (AS 08.80.158)
1431 ✓ Regulating automated dispensing machines (AS 08.80.400)
1432 ✓ Adding "apothecary" to prohibited terms (AS 08.80.420)
1433 ✓ Add technician seat to board membership; possibly remove 1 public seat (AS 08.80.010)
1434

From: [Schaber, Ashley R](#)
To: [Carrillo, Laura N \(CED\)](#)
Subject: RE: Technician vaccination inquiry
Date: Wednesday, November 9, 2022 12:02:36 PM

I would consider that to be part of the medication preparation process according to AS 08.80.480 (4)... technically compounding. This brings up another good point in that statutory definition of compounding does differ from USP and FDA, so we'll need to take a look at this at some point too.

Ashley

(4) "compounding" means the preparation, mixing, assembling, packaging, or labeling of a drug or device (A) as the result of a practitioner's prescription drug order or initiative based on the relationship of the practitioner, patient, and pharmacist in the course of professional practice or (B) for the purpose of, or as an incident to, research, teaching, or chemical analysis and not for sale or dispensing; "compounding" also includes the preparation of drugs or devices in anticipation of prescription drug orders based on routine, regularly observed prescribing patterns;

From: Carrillo, Laura N (CED) <laura.carrillo@alaska.gov>
Sent: Wednesday, November 9, 2022 11:47 AM
To: Schaber, Ashley R <arschaber@anthc.org>
Subject: FW: Technician vaccination inquiry

WARNING: This email originated outside of ANTHC from laura.carrillo@alaska.gov.
CAUTION: Do not click on links or open attachments unless you recognize the sender and trust these links or attachments are safe. Report all suspicious emails using the **Phish Alarm button** in Outlook.

Hi Ashley- I'm not sure on this question, below—what do you think?

Thank you,

Laura Carrillo, MPH
Executive Administrator
Alaska Board of Pharmacy
State of Alaska – DCCED – CBPL
Direct: 907-465-1073
Fax: 907-465-2974

From: Cassandra Sanborn <cassandra.Sanborn@tanachiefs.org>
Sent: Wednesday, November 9, 2022 10:11 AM
To: Carrillo, Laura N (CED) <laura.carrillo@alaska.gov>
Subject: Technician vaccination inquiry

You don't often get email from cassandra.sanborn@tanachiefs.org. [Learn why this is important](#)

CAUTION: This email originated from outside the State of Alaska mail system. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good morning,

I work at Chief Andrew Isaac Health Center in Fairbanks and we are looking to train our technicians to assist with our vaccine process. They would not be administering vaccine, just drawing them up. Does this require the immunization training or is this considered compounding?

Which immunization program is approved by the Alaska Board of Pharmacy?

Thanks,
Cassandra

Department of Commerce Community, and Economic Development
Corporations, Business and Professional Licensing

Summary of All Professional Licensing
Schedule of Revenues and Expenditures

Prescription Drug Monitoring Program	FY 16	FY 17	Biennium	FY 18	FY 19	Biennium	FY 20	FY 21	Biennium	FY 22
Revenue										
Revenue from License Fees			\$ -	\$ -	\$ 90,765	\$ 90,765	\$ 26,150	\$ 191,320	\$ 217,470	\$ 32,490
General Fund Received								\$ -	-	\$ 222
Allowable Third Party Reimbursements	-	-	-	-	-	-	\$ -	\$ -	-	\$ -
TOTAL REVENUE	\$ -	\$ -	\$ -	\$ -	\$ 90,765	\$ 90,765	\$ 26,150	\$ 191,320	\$ 217,470	\$ 32,712
Expenditures										
Non Investigation Expenditures										
1000 - Personal Services			-	-	6,043	6,043	41,343	(238)	41,105	1,283
2000 - Travel			-	-	-	-	796	-	796	3,175
3000 - Services			-	-	11	11	6,155	1,966	8,121	6,954
4000 - Commodities			-	-	-	-	-	-	-	-
5000 - Capital Outlay			-	-	-	-	-	-	-	-
Total Non-Investigation Expenditures	-	-	-	-	6,054	6,054	48,294	1,728	50,022	11,412
Investigation Expenditures										
1000-Personal Services			-	-	-	-	-	-	-	1,557
2000 - Travel			-	-	-	-	-	-	-	-
3023 - Expert Witness			-	-	-	-	-	-	-	-
3088 - Inter-Agency Legal			-	-	-	-	-	-	-	-
3094 - Inter-Agency Hearing/Mediation			-	-	-	-	-	-	-	-
3000 - Services other			-	-	-	-	-	-	-	-
4000 - Commodities			-	-	-	-	-	-	-	-
Total Investigation Expenditures	-	-	-	-	-	-	-	-	-	1,557
Total Direct Expenditures	-	-	-	-	6,054	6,054	48,294	1,728	50,022	12,969
Indirect Expenditures										
Internal Administrative Costs			-	-	-	-	-	-	-	-
Departmental Costs			-	-	-	-	-	-	-	-
Statewide Costs			-	-	-	-	-	-	-	-
Total Indirect Expenditures	-	-	-	-	-	-	-	-	-	-
TOTAL EXPENDITURES	\$ -	\$ -	\$ -	\$ -	\$ 6,054	\$ 6,054	\$ 48,294	\$ 1,728	\$ 50,022	\$ 12,969
Cumulative Surplus (Deficit)										
Beginning Cumulative Surplus (Deficit)	\$ -	\$ -		\$ -	\$ -		\$ 84,711	\$ 62,567		\$ 252,159
Annual Increase/(Decrease)	-	-		-	84,711		(22,144)	189,592		19,743
Ending Cumulative Surplus (Deficit)	\$ -	\$ -		\$ -	84,711		\$ 62,567	\$ 252,159		271,902
										* No fee changes needed
Statistical Information										
Number of Licenses for Indirect calculation					-	-	-	-		-
Additional information:										
<ul style="list-style-type: none"> Fee analysis required if the cumulative is less than zero; fee analysis recommended when the cumulative is less than current year expenditures; no fee increases needed if cumulative is over the current year expenses * Most recent fee change: Fee reduction FY12 Annual license fee analysis will include consideration of other factors such as board and licensee input, potential investigation load, court cases, multiple license and fee types under one program, and program ch 										

Appropriation	(Multiple Items)
Sub Unit	(All)
PL Task Code	PDMP

Sum of Budgetary Expenditures	Object Type Name (Ex)			
Object Name (Ex)	1000 - Personal Services	2000 - Travel	3000 - Services	Grand Total
1011 - Regular Compensation	8,024.03			8,024.03
1014 - Overtime	180.26			180.26
1023 - Leave Taken	248.95			248.95
1028 - Alaska Supplemental Benefit	519.03			519.03
1029 - Public Employee's Retirement System Defined Benefits	178.87			178.87
1030 - Public Employee's Retirement System Defined Contribution	416.26			416.26
1034 - Public Employee's Retirement System Defined Cont Health Reim	252.20			252.20
1035 - Public Employee's Retirement Sys Defined Cont Retiree Medical	84.07			84.07
1037 - Public Employee's Retirement Sys Defined Benefit Unfnd Liab	1,540.48			1,540.48
1039 - Unemployment Insurance	5.52			5.52
1040 - Group Health Insurance	1,814.12			1,814.12
1041 - Basic Life and Travel	0.38			0.38
1042 - Worker's Compensation Insurance	50.25			50.25
1047 - Leave Cash In Employer Charge	208.44			208.44
1048 - Terminal Leave Employer Charge	90.99			90.99
1053 - Medicare Tax	119.43			119.43
1077 - ASEA Legal Trust	11.04			11.04
1080 - SU Legal Trst	1.10			1.10
1970 - Personal Services Transfer	(10,905.97)			(10,905.97)
2000 - In-State Employee Airfare		821.62		821.62
2001 - In-State Employee Surface Transportation		570.27		570.27
2002 - In-State Employee Lodging		1,398.52		1,398.52
2003 - In-State Employee Meals and Incidentals		384.48		384.48
3002 - Memberships			300.00	300.00
3085 - Inter-Agency Mail			1,037.70	1,037.70
3088 - Inter-Agency Legal			5,616.15	5,616.15
Grand Total	2,839.45	3,174.89	6,953.85	12,968.19

Department of Commerce Community, and Economic Development
Corporations, Business and Professional Licensing

Summary of All Professional Licensing
Schedule of Revenues and Expenditures

Board of Pharmacy	FY 16	FY 17	Biennium	FY 18	FY 19	Biennium	FY 20	FY 21	Biennium	FY 22
Revenue										
Revenue from License Fees	\$ 802,230	\$ 208,755	\$ 1,010,985	\$ 801,317	\$ 213,770	\$ 1,015,087	\$ 631,105	\$ 1,121,447	\$ 1,752,552	\$ 444,975
General Fund Received							\$ -	\$ -	\$ -	\$ 29,810
Allowable Third Party Reimbursements	-	3,256	3,256	210	962	1,172	\$ -	\$ -	\$ -	\$ 1,650
TOTAL REVENUE	\$ 802,230	\$ 212,011	\$ 1,014,241	\$ 801,527	\$ 214,732	\$ 1,016,259	\$ 631,105	\$ 1,121,447	\$ 1,752,552	\$ 476,435
Expenditures										
Non Investigation Expenditures										
1000 - Personal Services	156,115	151,947	308,062	204,727	194,745	399,472	199,334	278,612	477,946	284,719
2000 - Travel	16,676	11,119	27,795	13,704	8,299	22,003	2,641	-	2,641	6,363
3000 - Services	13,361	14,293	27,654	21,960	27,781	49,741	45,283	46,180	91,463	29,584
4000 - Commodities	111	519	630	-	26	26	521	-	521	82
5000 - Capital Outlay	-	-	-	-	-	-	-	-	-	-
Total Non-Investigation Expenditures	186,263	177,878	364,141	240,391	230,851	471,242	247,779	324,792	572,571	320,748
Investigation Expenditures										
1000-Personal Services	68,935	63,727	132,662	68,679	69,997	138,676	57,738	106,494	164,232	94,519
2000 - Travel	-	-	-	-	-	-	1,260	-	1,260	5,221
3023 - Expert Witness	-	2,800	2,800	-	-	-	-	-	-	-
3088 - Inter-Agency Legal	1,451	23,355	24,806	-	3,062	3,062	2,537	1,269	3,806	12,011
3094 - Inter-Agency Hearing/Mediation	-	883	883	-	-	-	694	152	846	1,758
3000 - Services other	-	-	-	-	400	400	269	216	485	338
4000 - Commodities	-	-	-	-	-	-	-	-	-	-
Total Investigation Expenditures	70,386	90,765	161,151	68,679	73,459	142,138	62,498	108,131	170,629	113,847
Total Direct Expenditures	256,649	268,643	525,292	309,070	304,310	613,380	310,277	432,923	743,200	434,595
Indirect Expenditures										
Internal Administrative Costs	128,025	123,008	251,033	150,986	155,128	306,114	164,443	191,897	356,340	182,236
Departmental Costs	48,707	73,682	122,389	78,139	81,374	159,513	58,131	75,431	133,562	76,951
Statewide Costs	15,564	26,226	41,790	30,555	27,069	57,624	33,868	52,856	86,724	47,667
Total Indirect Expenditures	192,296	222,916	415,212	259,680	263,571	523,251	256,442	320,184	576,626	306,854
TOTAL EXPENDITURES	\$ 448,945	\$ 491,559	\$ 940,504	\$ 568,750	\$ 567,881	\$ 1,136,631	\$ 566,719	\$ 753,107	\$ 1,319,826	\$ 741,449
Cumulative Surplus (Deficit)										
Beginning Cumulative Surplus (Deficit)	\$ 201,479	\$ 554,764		\$ 275,216	\$ 507,993		\$ 154,844	\$ 219,230		\$ 587,570
Annual Increase/(Decrease)	353,285	(279,548)		232,777	(353,149)		64,386	368,340		(265,014)
Ending Cumulative Surplus (Deficit)	\$ 554,764	\$ 275,216		\$ 507,993	154,844		\$ 219,230	\$ 587,570		322,556
										* Fee analysis recommend
Statistical Information										
Number of Licenses for Indirect calculation	4,649	5,068		5,680	6,203		5,934	6,917		6,542
Additional information:	<ul style="list-style-type: none"> Fee analysis required if the cumulative is less than zero; fee analysis recommended when the cumulative is less than current year expenditures; no fee increases needed if cumulative is over the current year expenses * Most recent fee change: Fee reduction FY22 Annual license fee analysis will include consideration of other factors such as board and licensee input, potential investigation load, court cases, multiple license and fee types under one program, and program ch 									

Appropriation	(Multiple Items)
Sub Unit	(All)
PL Task Code	PHA1

Sum of Budgetary Expenditures	Object Type Name (Ex)				
Object Name (Ex)	1000 - Personal Services	2000 - Travel	3000 - Services	4000 - Commodities	Grand Total
1011 - Regular Compensation	193,439.77				193,439.77
1014 - Overtime	2,119.58				2,119.58
1016 - Other Premium Pay	182.18				182.18
1023 - Leave Taken	29,009.49				29,009.49
1028 - Alaska Supplemental Benefit	13,794.84				13,794.84
1029 - Public Employee's Retirement System Defined Benefits	5,331.52				5,331.52
1030 - Public Employee's Retirement System Defined Contribution	10,982.14				10,982.14
1034 - Public Employee's Retirement System Defined Cont Health Reim	6,300.96				6,300.96
1035 - Public Employee's Retirement Sys Defined Cont Retiree Medical	2,213.72				2,213.72
1037 - Public Employee's Retirement Sys Defined Benefit Unfnd Liab	42,603.69				42,603.69
1039 - Unemployment Insurance	340.92				340.92
1040 - Group Health Insurance	56,732.40				56,732.40
1041 - Basic Life and Travel	46.24				46.24
1042 - Worker's Compensation Insurance	1,632.40				1,632.40
1047 - Leave Cash In Employer Charge	4,518.14				4,518.14
1048 - Terminal Leave Employer Charge	3,028.85				3,028.85
1053 - Medicare Tax	3,126.39				3,126.39
1062 - GGU Business Leave Bank Contributions	250.89				250.89
1069 - SU Business Leave Bank Contributions	18.36				18.36
1077 - ASEA Legal Trust	198.96				198.96
1079 - ASEA Injury Leave Usage	25.12				25.12
1080 - SU Legal Trst	22.44				22.44
1970 - Personal Services Transfer	3,319.30				3,319.30
2000 - In-State Employee Airfare		2,084.65			2,084.65
2001 - In-State Employee Surface Transportation		1,059.78			1,059.78
2002 - In-State Employee Lodging		2,252.00			2,252.00
2003 - In-State Employee Meals and Incidentals		420.00			420.00
2005 - In-State Non-Employee Airfare		1,532.37			1,532.37
2007 - In-State Non-Employee Lodging		708.30			708.30
2009 - In-State Non-Employee Taxable Per Diem		45.00			45.00
2010 - In-State Non-Employee Non-Taxable Reimbursement		21.75			21.75
2012 - Out-State Employee Airfare		711.10			711.10
2013 - Out-State Employee Surface Transportation		156.93			156.93
2014 - Out-State Employee Lodging		881.40			881.40
2015 - Out-State Employee Meals and Incidentals		163.05			163.05
2020 - Out-State Non-Employee Meals and Incidentals		139.50			139.50
2022 - Out-State Non-Employee Non-Taxable Reimbursement		1,408.37			1,408.37
2970 - Travel Cost Transfer		-			-
3000 - Training/Conferences			850.00		850.00
3001 - Test Monitor/Proctor			-		-
3002 - Memberships			250.00		250.00
3044 - Courier			3.55		3.55
3045 - Postage			340.90		340.90
3046 - Advertising			2,541.60		2,541.60
3085 - Inter-Agency Mail			3,728.38		3,728.38
3088 - Inter-Agency Legal			20,317.04		20,317.04
3094 - Inter-Agency Hearing/Mediation			2,039.80		2,039.80
3100 - Inter-Agency Safety			13,619.75		13,619.75
4002 - Business Supplies				81.87	81.87
Grand Total	379,238.30	11,584.20	43,691.02	81.87	434,595.39

434596

(0.61)

FY 2022 CBPL COST ALLOCATIONS

Name	Task Code	Direct Revenues	General Fund Received	3rd Party Reimbursement	Total Revenues	Direct Expense	Percentage of board licenses/total licensees:	Department certified transactions % by Fiscal Revenue %	Indirect Expense (Total Non-PCN Allocated)	Percentage of program direct Personal Services:	Total Indirect Expenses	Total Expenses	2022 Annual Surplus (Deficit)	FY21 Direct Expense	FY21 Indirect Expenses	FY21 Total Expenses
Acupuncture	ACU1	\$ 2,315	\$ 306	-	\$ 2,621	\$ 3,921	\$ 2,322	\$ 782	\$ 3,994	\$ 1,205	\$ 5,199	\$ 9,120	\$ (6,499)	\$ 3,734	\$ 5,489	\$ 9,223
Architects, Engineer	AEL1	\$ 957,475	\$ 17,581	\$ 1,375	\$ 976,431	\$ 284,522	\$ 230,294	\$ 3,783	\$ 234,077	\$ 70,096	\$ 304,173	\$ 588,695	\$ 387,736	\$ 282,663	\$ 254,030	\$ 536,693
Athletic Trainers	ATH1	\$ 5,930	\$ 80	-	\$ 6,010	\$ 1,044	\$ 1,673	\$ 598	\$ 2,271	\$ 314	\$ 2,585	\$ 3,629	\$ 2,381	\$ 8,349	\$ 4,381	\$ 12,730
Audiology and Speech Pathologists	AUD1	\$ 69,567	\$ 1,536	-	\$ 71,103	\$ 20,790	\$ 23,052	\$ 2,049	\$ 25,101	\$ 6,053	\$ 31,154	\$ 51,944	\$ 19,159	\$ 26,607	\$ 33,237	\$ 59,844
Barbers & Hairdressers	BAH1	\$ 1,035,668	\$ 21,523	-	\$ 1,057,209	\$ 320,315	\$ 212,858	\$ 4,805	\$ 217,661	\$ 84,847	\$ 302,508	\$ 622,823	\$ 434,386	\$ 281,634	\$ 257,801	\$ 539,435
Behavior Analysts	BEV1	\$ 6,210	\$ 319	-	\$ 6,529	\$ 5,855	\$ 2,580	\$ 854	\$ 3,436	\$ 1,256	\$ 4,690	\$ 10,545	\$ (4,016)	\$ 4,966	\$ 5,106	\$ 10,072
CHI	CHI1	\$ 24,005	\$ 6,407	-	\$ 30,412	\$ 147,878	\$ 12,978	\$ 2,175	\$ 12,978	\$ 32,257	\$ 38,235	\$ 185,913	\$ (155,501)	\$ 137,019	\$ 45,115	\$ 182,134
Collection Agencies	COA1	\$ 62,375	\$ 2,208	-	\$ 64,583	\$ 31,054	\$ 22,287	\$ 1,439	\$ 23,726	\$ 8,706	\$ 32,432	\$ 63,488	\$ 1,907	\$ 33,147	\$ 29,527	\$ 62,674
Concert Promoters	CPR1	\$ 3,250	\$ 1,836	-	\$ 5,086	\$ 3,095	\$ 482	\$ 631	\$ 1,113	\$ 951	\$ 2,064	\$ 5,159	\$ (73)	\$ 574	\$ 1,181	\$ 1,755
CON1	CON1	\$ 912,525	\$ 20,197	-	\$ 932,722	\$ 469,007	\$ 319,355	\$ 4,326	\$ 323,681	\$ 79,623	\$ 403,304	\$ 872,311	\$ 60,411	\$ 496,407	\$ 327,460	\$ 823,867
Home Inspectors	HNI1	\$ 23,410	\$ 743	-	\$ 24,153	\$ 9,563	\$ 3,686	\$ 1,136	\$ 4,822	\$ 2,930	\$ 7,752	\$ 17,335	\$ 6,816	\$ 6,676	\$ 6,036	\$ 12,712
Dental	DEN1	\$ 138,196	\$ 275,253	-	\$ 413,448	\$ 187,263	\$ 66,860	\$ 2,781	\$ 69,641	\$ 43,708	\$ 113,349	\$ 300,612	\$ 112,836	\$ 225,301	\$ 124,531	\$ 349,832
Dietitians/Nutritionists	DTN1	\$ 21,365	\$ 401	-	\$ 21,766	\$ 5,499	\$ 10,094	\$ 1,368	\$ 11,462	\$ 1,582	\$ 13,044	\$ 18,543	\$ 3,223	\$ 13,508	\$ 9,466	\$ 22,974
Direct Entry Midwife	MDI1	\$ 17,065	\$ 1,165	-	\$ 18,230	\$ 16,245	\$ 1,333	\$ 816	\$ 5,591	\$ 6,749	\$ 24,985	\$ (6,755)	\$ 22,687	\$ 5,555	\$ 26,242	\$ 31,791
Dispensing Opticians	DOP1	\$ 9,220	\$ 23,308	-	\$ 32,528	\$ 6,798	\$ 4,395	\$ 1,506	\$ 5,901	\$ 2,078	\$ 7,980	\$ 14,778	\$ 17,750	\$ 15,035	\$ 8,485	\$ 23,520
EAD1	EAD1	\$ 184,943	\$ 3,000	-	\$ 187,943	\$ 107,134	\$ 27,382	\$ 2,146	\$ 29,508	\$ 11,828	\$ 41,336	\$ 148,470	\$ 39,473	\$ 67,402	\$ 33,175	\$ 100,577
EUT1	EUT1	\$ 1,500	\$ 6,151	-	\$ 7,651	\$ 131	\$ 312	\$ 484	\$ 796	\$ 40	\$ 836	\$ 967	\$ 6,604	\$ 1,833	\$ 981	\$ 2,814
Geologists	GEO1	\$ 240	\$ 100	-	\$ 340	\$ 1,290	\$ 284	\$ 669	\$ 953	\$ 393	\$ 1,346	\$ 2,636	\$ (2,296)	\$ 793	\$ 1,039	\$ 1,832
Guardians/Conservators	GCO1	\$ 2,043	\$ 9,346	-	\$ 11,389	\$ 3,421	\$ 454	\$ 286	\$ 740	\$ 1,053	\$ 1,793	\$ 5,214	\$ 6,175	\$ 637	\$ 919	\$ 1,556
GUI1	GUI1	\$ 1,193,160	\$ 27,969	-	\$ 1,221,069	\$ 409,590	\$ 46,359	\$ 3,657	\$ 50,016	\$ 110,023	\$ 160,039	\$ 569,629	\$ 651,440	\$ 405,369	\$ 134,630	\$ 539,999
Marine Pilots	MAR1	\$ 18,620	\$ 1,561	-	\$ 20,601	\$ 38,861	\$ 4,140	\$ 1,153	\$ 5,293	\$ 7,693	\$ 12,886	\$ 51,967	\$ (31,266)	\$ 51,354	\$ 18,279	\$ 69,633
Foreign Pleasure Craft	PPC1	\$ 94,283	\$ 812	-	\$ 95,095	\$ 10,424	-	\$ 854	\$ 854	\$ 3,201	\$ 4,055	\$ 14,478	\$ 80,616	\$ 9,368	\$ 3,707	\$ 13,075
Marital & Family Therapy	MFT1	\$ 38,880	\$ 53,761	-	\$ 92,641	\$ 23,651	\$ 4,026	\$ 1,582	\$ 5,608	\$ 6,745	\$ 12,353	\$ 36,004	\$ 56,637	\$ 37,587	\$ 14,725	\$ 52,312
Massage Therapists	MAS1	\$ 400,930	\$ 230,859	-	\$ 631,488	\$ 261,538	\$ 39,753	\$ 3,173	\$ 42,926	\$ 61,780	\$ 104,706	\$ 366,244	\$ 265,245	\$ 197,556	\$ 86,077	\$ 283,633
Mechanical Administrator	MEC1	\$ 115,080	\$ 2,773	-	\$ 117,853	\$ 121,729	\$ 17,410	\$ 1,809	\$ 19,219	\$ 10,932	\$ 30,151	\$ 151,880	\$ (34,027)	\$ 56,147	\$ 23,772	\$ 79,919
MED1	MED1	\$ 945,106	\$ 272,744	-	\$ 1,217,850	\$ 907,475	\$ 234,179	\$ 4,603	\$ 238,782	\$ 226,402	\$ 465,184	\$ 1,372,659	\$ (154,809)	\$ 899,162	\$ 569,260	\$ 1,468,422
Mortuary Science	MOR1	\$ 7,105	\$ 581	-	\$ 7,686	\$ 7,716	\$ 3,771	\$ 675	\$ 4,646	\$ 2,290	\$ 6,936	\$ 14,652	\$ (6,966)	\$ 4,042	\$ 5,193	\$ 9,235
Naturopaths	NAT1	\$ 83,690	\$ 110	-	\$ 83,800	\$ 1,768	\$ 1,503	\$ 905	\$ 2,408	\$ 435	\$ 2,843	\$ 4,611	\$ 79,189	\$ 7,091	\$ 3,750	\$ 10,841
Nurse Aides	NAJ1	\$ 403,929	\$ 15,541	-	\$ 419,470	\$ 293,537	\$ 104,287	\$ 2,714	\$ 107,001	\$ 61,265	\$ 168,266	\$ 461,803	\$ (42,333)	\$ 226,749	\$ 146,755	\$ 373,504
Nursing	NUR1	\$ 2,224,184	\$ 514,725	\$ 833	\$ 2,839,753	\$ 1,751,708	\$ 694,541	\$ 5,331	\$ 699,872	\$ 379,830	\$ 1,079,702	\$ 2,831,411	\$ 8,342	\$ 1,448,247	\$ 911,621	\$ 2,359,868
Nursing Home Administrators	NHA1	\$ 3,100	\$ 14,064	-	\$ 17,164	\$ 5,300	\$ 1,503	\$ 652	\$ 2,155	\$ 1,169	\$ 3,324	\$ 8,540	\$ 6,051	\$ 3,390	\$ 9,441	\$ 105,329
Optometry	OPT1	\$ 25,770	\$ 10,027	-	\$ 35,797	\$ 42,853	\$ 6,578	\$ 1,405	\$ 7,983	\$ 10,893	\$ 18,876	\$ 61,729	\$ 64,268	\$ 73,836	\$ 31,493	\$ 105,329
Powerbrokers	PAW1	\$ 2,155	\$ 722	-	\$ 2,877	\$ 9,272	\$ 881	\$ 576	\$ 1,257	\$ 2,847	\$ 4,104	\$ 13,376	\$ (10,490)	\$ 60	\$ 685	\$ 745
Pharmacy	PHA1	\$ 444,975	\$ 29,810	\$ 1,650	\$ 476,435	\$ 434,595	\$ 185,494	\$ 4,633	\$ 190,127	\$ 116,727	\$ 306,854	\$ 741,449	\$ (265,014)	\$ 432,923	\$ 320,184	\$ 753,107
Physical/Occupational Therapy	PHY1	\$ 412,136	\$ 8,330	-	\$ 420,466	\$ 109,867	\$ 61,784	\$ 3,581	\$ 65,365	\$ 32,838	\$ 98,203	\$ 208,070	\$ 212,396	\$ 134,328	\$ 92,146	\$ 226,474
Prescription Drug Monitoring Program	PDMP	\$ 32,490	\$ 222	-	\$ 32,712	\$ 12,968	-	-	-	-	-	\$ 12,968	\$ 19,744	-	-	\$ 19,744
Professional Counselors	PCO1	\$ 267,862	\$ 10,910	-	\$ 278,772	\$ 148,004	\$ 33,288	\$ 3,105	\$ 36,393	\$ 43,011	\$ 79,404	\$ 227,408	\$ 51,364	\$ 154,477	\$ 77,160	\$ 231,637
Psychology	PSY1	\$ 33,536	\$ 42,146	-	\$ 75,682	\$ 85,474	\$ 11,484	\$ 2,373	\$ 13,857	\$ 22,301	\$ 36,158	\$ 121,632	\$ (45,950)	\$ 67,981	\$ 32,539	\$ 100,520
Public Accountancy	CPA1	\$ 646,145	\$ 17,196	\$ 720	\$ 664,061	\$ 230,968	\$ 52,711	\$ 5,541	\$ 58,252	\$ 67,792	\$ 122,333	\$ 353,301	\$ 310,760	\$ 212,245	\$ 102,906	\$ 315,151
Real Estate	REC1	\$ 820,700	\$ 17,842	-	\$ 838,542	\$ 270,986	\$ 115,175	\$ 2,361	\$ 117,536	\$ 76,253	\$ 187,789	\$ 458,775	\$ 379,767	\$ 261,752	\$ 170,261	\$ 432,013
Real Estate Appraisers	APR1	\$ 62,165	\$ 9,845	\$ 3,600	\$ 75,610	\$ 132,111	\$ 11,058	\$ 2,239	\$ 13,297	\$ 37,386	\$ 50,683	\$ 182,794	\$ (107,184)	\$ 104,618	\$ 36,203	\$ 140,821
Social Workers	CSW1	\$ 326,730	\$ 49,705	-	\$ 376,435	\$ 180,156	\$ 33,316	\$ 3,101	\$ 36,417	\$ 47,862	\$ 84,279	\$ 264,436	\$ 119,000	\$ 197,763	\$ 74,517	\$ 272,280
Storage Tank Workers	UST1	\$ 6,790	\$ 874	-	\$ 7,664	\$ 11,242	\$ 1,766	\$ 724	\$ 2,510	\$ 3,444	\$ 5,954	\$ 17,196	\$ (9,532)	\$ 6,406	\$ 3,472	\$ 9,878
Veterinary	VET1	\$ 69,880	\$ 19,480	-	\$ 89,360	\$ 123,779	\$ 23,109	\$ 2,345	\$ 25,457	\$ 37,343	\$ 62,800	\$ 186,579	\$ (87,219)	\$ 138,572	\$ 70,255	\$ 208,827
No longer extant board/commission (ie ASHets)																
Total All Boards		\$ 12,156,460	\$ 1,934,690	\$ 8,178	\$ 14,099,238	\$ 7,252,238	\$ 2,629,330	\$ 88,198	\$ 2,717,828	\$ 1,710,974	\$ 4,428,802	\$ 11,689,740	\$ 2,419,498	\$ 6,763,389	\$ 4,088,214	\$ 10,851,594

ABL & Corporations	080801005	\$ 7,124,804	\$ -	\$ 7,124,804	\$ 1,405,967	\$ 138,033	\$ 8,723	\$ 146,756	\$ 158,895	\$ 305,651	\$ 1,711,618
Fines & Forfeit GF		75,306		75,306							-
Revenue Transfer In (Carry Forward Net) CFWD		9,356,591		9,356,591							-
Reimbursable Service Agreements AR 080801007		-		-							-
RSA 0822041- DHSS Nurse Aide Program		145,000		145,000	145,000						145,000
RSA 0822011- DHSS PFS- DOA BJA PDMP		116,799		116,799	116,799						116,799
RSA 0822010- DHSS EPI PDMP		336,469		336,469	336,469						336,469
RSA 0822012 Child Support Assistance				985	985						985
RSA 0822009- DHSS PFS- PDMP		89,402		89,402	89,402						89,402
RSA 0822238- Emergency Medical Licensae		80,000		80,000	80,000						80,000
Interagency clearing		916		916	916						916
Real Estate Recovery Fund ZSU1		101,260		101,260	43,243						43,243
DWAD - Emergency Authorizations		350		350							
RSA 0822010- DHSS EPI PDMP Third Par080801108		2,533		2,533	2,533						2,533
Total CBPL		\$ 29,584,342	\$ 1,934,600	\$ 10,711	\$ 31,529,653	\$ 9,473,551	\$ 2,767,363	\$ 96,921	\$ 2,864,284	\$ 1,869,869	\$ 4,734,153
											\$ 14,207,704

DIVISION INDIRECT EXPENSES	Total	Prof Lic	Corp & Bus Lic
Percentage of program direct Personal Services:			
Business Supplies	28,432	24,275	4,157
Office Equipment	46,620	43,685	2,935
State Vehicles	4,060	3,695	365
Storage and Archives	12,685	12,356	329
Legal Support	51,845	51,845	-
Central Mail Services Postage	38,648	19,602	19,046
Software Licensing and Maintenance	96,529	90,358	6,171
Division Administrative Expenses - all other	192,266	192,266	-
Division allocated by percentage of direct personal services:	471,085	438,082	33,003
Percentage of board licenses/total licensees:			
Investigations indirect Personal Services	420,043	398,051	21,992
Division Administration Personal Services	1,831,020	1,761,446	69,574
Division allocated by percentage of board licenses/total licensees:	2,251,063	2,159,497	91,566
Total Division Indirect Expenses	2,722,148	2,597,579	124,569
DEPARTMENT INDIRECT EXPENSES	Total	Prof Lic	Corp & Bus Lic
Percentage of program direct Personal Services:			
Commissioner's Office	168,220	153,080	15,140
Administrative Services - Director's Office	59,823	54,439	5,384
Administrative Services - Human Resources	93,556	85,136	8,420
Administrative Services - Fiscal	89,898	81,807	8,091
Administrative Services - Budget	61,186	55,679	5,507
Administrative Services - Information Technology	122,146	111,153	10,993
Administrative Services - Information Technology - Network & Database	25,235	22,964	2,271
Administrative Services - Mail	10,900	9,919	981
Administrative Services - Facilities - Maintenance	-	-	-
Department allocated by percentage of direct personal services:	630,964	574,177	56,787
Percentage of board licenses/total licensees:			
Department administrative services support: Fiscal, IT, Procurement	516,300	469,833	46,467
Receiving transaction % by Personal Services:			
Department certified transactions % by Fiscal Revenue \$	96,921	88,198	8,723
Total DEPARTMENT INDIRECT EXPENSES	1,244,185	1,132,208	111,977
STATEWIDE INDIRECT EXPENSES	Total	Prof Lic	Corp & Bus Lic
Percentage of program direct Personal Services:			
Accounting and Payroll Systems	54,521	49,614	4,907
State Owned Building Rental (Building Leases)	354,120	322,249	31,871
State OIT Server Hosting & Storage	9,785	8,904	881
State OIT SQL	22,402	20,386	2,016
State Software Licensing	-	-	-
Human Resources	52,542	47,813	4,729
IT Non-Telecommunications (Core Cost)	241,355	219,633	21,722
IT Telecommunications	29,452	26,801	2,651
Risk Management	3,643	3,315	328
Statewide allocated by percentage of direct personal services:	767,820	698,715	69,105
FY22 TOTALS BY METHODOLOGY	Total	Prof Lic	Corp & Bus Lic
Percentage of program direct Personal Services:	1,869,869	1,710,974	158,895
Percentage of board licenses/total licensees:	2,767,363	2,629,330	138,033
Receiving transaction % by Personal Services:	96,921	88,198	8,723
Grand Total	4,734,153	4,428,502	305,651

Board or Commission: Alaska Board of Pharmacy

Meeting Date: _____

Agenda Item # _____ Tab # _____ Topic: _____

Primary Motion

Motion:

Board Member	Motion	2nd		Yes Vote	No Vote	Abstain	Recuse	Comments

Subsidiary Motion or Amendment

Motion:

Board Member	Motion	2nd		Yes Vote	No Vote	Abstain	Recuse	Comments

EXECUTIVE SESSION MOTION

Sec. 44.62.310. Government meetings public.

(c) The following subject may be considered in an executive session:

- (1) matters, the immediate knowledge of which would clearly have an adverse effect upon the finances of the public entity;
- (2) subjects that tend to prejudice the reputation and character of any person, provided the person may request a public discussion;
- (3) matters which by law, municipal charter, or ordinance are required to be confidential;
- (4) matters involving consideration of government records that by law are not subject to public disclosure.

MOTION WORDING:

“In accordance with the provisions of Alaska Statute 44.62.310 (c), I move to go into executive session for the purpose of discussing (select the appropriate statutory citation for the situation):

- (1) **matters, the immediate knowledge of which would clearly have an adverse effect upon the finances of the public entity; *OR***
- (2) **subjects that tend to prejudice the reputation and character of any person, provided the person may request a public discussion; *OR***
- (3) **matters which by law, municipal charter, or ordinance are required to be confidential; *OR***
- (4) **matters involving consideration of government records that by law are not subject to public disclosure.**

**Board staff is requested to remain during the session *OR*
Board only to remain during session.”**

Staff will then state **“The board is off the record at _____(time).”**

ORDER OF OPERATIONS TO ACT AS A BOARD

Best practices:

1. A member seeks recognition from the chair.
 2. The member is recognized by the chair and "has the floor."
 3. The member makes a motion.
 4. The motion is seconded (if appropriate, see chart on other side).
 5. The chair (or staff, if delegated) restates the motion to the body.
 6. Board or commission debates the motion.
 7. Subsidiary motions are made, if any: Amend, table, send to committee (see chart on other side).
 8. Board or commission votes on subsidiary motion, if any.
 9. Board or commission votes on the main motion either by roll call or unanimous consent.
 10. The chair (or staff) announces the result of the vote.
1. Makers of motions should write them down before verbalizing, then hand the written motion to the secretary once the motion has been made on the floor.
 2. It is appropriate for the chair to call for a brief break ("at ease") to untangle the motions when operations become confused. Do not proceed in confusion.

PURPOSE	YOU SAY	INTER- RUPT?	2 ND ?	DEBATE?	AMEND?	VOTE?
Bring business before the board	I move to...	No	Yes	Yes	Yes	Majority
Modify wording of motion	I move to amend the motion by...	No	Yes	Yes	Yes	Majority
Lay aside temporarily	I move to lay the question on the table.	No	Yes	No	No	Majority
Close debate	I move the previous question.	No	Yes	No	No	2/3
Limit or extend debate	I move that debate be limited to...	No	Yes	No	Yes	2/3
Postpone to a certain time	I move to postpone the motion to...	No	Yes	Yes	Yes	Majority
Refer to committee	I move to refer the motion to...	No	Yes	Yes	Yes	Majority
Kill main motion	I move that the motion be postponed indefinitely.	No	Yes	Yes	Yes	Majority
Make follow agenda	I call for the orders of the day.	Yes	No	No	No	None or 2/3 to overrule
Take matter from table	I move to take from the table...	No	Yes	No	No	Majority
Cancel previous action	I move to rescind...	No	Yes	Yes	Yes	2/3 w/o prior notice
Reconsider motion	I move to reconsider...	No	Yes	Varies	No	Majority
Take a break	I move to recess for...	No	Yes	No	Yes	Majority
Close meeting	I move to adjourn.	No	Yes	No	No	Majority